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| Fill in this information to ident | ify your case: | The state of the s | | |
|--|---|--|--|--|
| United States Bankruptcy Court | for the: | UNITED STATES BANKRUPTGY COURT | | |
| Northern District of Illinois | | MORTHERN DISTRICT OF ILLINOIS | | |
| Case number (If known): | Chapter you are filing under: Chapter 7 Chapter 11 | JUL 16 2018 | | |
| | Chapter 12 Chapter 13 | JEFFREY D Speck Hithis is an LERK | | |
| Official Form 101 | | | | |
| Voluntary Pet | ition for Individuals Filin | ig for Bankruptcy 12/17 | | |
| joint case—and in joint cases, the answer would be yes if either Debtor 2 to distinguish between same person must be Debtor 1 in Be as complete and accurate as | or debtor owns a car. When information is needed about them. In joint cases, one of the spouses must report in all of the forms. possible. If two married people are filing together, both eded, attach a separate sheet to this form. On the top of | ebtors. For example, if a form asks, "Do you own a car," ut the spouses separately, the form uses <i>Debtor 1</i> and nformation as <i>Debtor 1</i> and the other as <i>Debtor 2</i> . The | | |
| | | | | |
| 1. Your full name | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
| | | | | |
| Write the name that is on your government-issued picture | Doris | | | |
| identification (for example, your driver's license or | First name Yolanda | First name | | |
| passport). | Middle name | Middle name | | |
| Bring your picture | Coburn | | | |
| identification to your meeting with the trustee. | Last name | Last name | | |
| | Suffix (Sr., Jr., il, III) | Suffix (Sr., Jr., II, III) | | |
| All all and a second se | | | | |
| 2. All other names you have used in the last 8 | Same-as-above First name | First name | | |
| years | | | | |
| Include your married or maiden names. | Middle name | Middle name | | |
| | Last name | Last name | | |
| | First name | First name | | |
| | Middle name | Middle name | | |
| | Last name | Last name | | |
| 3. Only the last 4 digits of | | | | |
| your Social Security | xxx - xx - 2 1 0 2 | xxx - xx | | |
| number or federal Individual Taxpayer | OR | OR | | |
| Identification number | 9 xx - xx | 9 xx - xx | | |
| /PTIAN | | | | |

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| Debtor 1 | Doris Y | Coburn Name Last Name | | | Case number (if known) | |
|--------------------------|---|--|---|---|--|---|
| | ************************* | | | | | |
| | | About Debtor 1: | | | About Debtor 2 (Spouse Only i | n a Joint Case): |
| and E Identi (EIN) | ousiness names imployer ification Numbers you have used in | I have not used any | business names | or EINs. | ☐ I have not used any business | names or EINs. |
| | st 8 years e trade names and | Business name | | | Business name | *************************************** |
| | business as names | Business name | 7-7-1VI-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | | Business name | |
| | | EIN — — — | *************************************** | | EIN | Translate termina |
| | es. | EIN – — — — | | | EIN | очение мациона |
| . Where | you live | | y. | | If Debtor 2 lives at a different ac | ldress: |
| | | 3429 W. 12th Place | <u>.</u> | | | |
| | | Number Street | | | Number Street | |
| | | China | | | | |
| | | Chicago city | IL State | 60623 ZIP Code | City | State ZIP Code |
| | | Cook | | | | |
| | | County | | *************************************** | County | |
| | | If your mailing address above, fill it in here. Not any notices to you at this | e that the court w | the one vill send | If Debtor 2's mailing address is yours, fill it in here. Note that the any notices to this mailing address | court will send |
| | | Number Street | ************************************** | | Number Street | |
| | | P.O. Box | | | P.O. Box | |
| | | City | State | ZIP Code | City | State ZIP Code |
| Mhuw | ou are choosing | Check one: | | | en de la companya de La companya de la co | |
| this dis | strict to file for | Over the last 180 days I have lived in this dist other district. | before filing this rict longer than in | petition, any | Check one: Over the last 180 days before find the lived in this district longer other district. | ling this petition, than in any |
| | | I have another reason. (See 28 U.S.C. § 1408 | | | I have another reason. Explain. (See 28 U.S.C. § 1408.) | |
| | | | | | *************************************** | |
| | | | | | | |
| | | | | ······ | 74-77-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- | |

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| Debte | or 1 | Doris First Name | Y. Middle Name | (| Cobur | n e | | Case number (# | known) | | | |
|---|-----------------|---|-------------------|---|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | | |
| Pan | t 2: | Tell the Cou | rt About | Your | Bankru | ptcy Case | | | | | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | | | ou | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | | | |
| | | | | ☑ Chapter 7 | | | | | | | | |
| | | | | 🗖 Cha | pter 11 | | | 4 | | | | |
| | | | | 🗖 Cha | pter 12 | | | | | | | |
| | | | | ☐ Cha | pter 13 | | | | | | | |
| 8. H | łow yo | ou will pay th | | loca you sub with | il court rself, yo mitting y a pre-p ed to p | for more details abouou may pay with cash your payment on you printed address. ay the fee in installe | nt how you man the control of the co | nay pay. Typical check, or money ur attorney may u choose this or | peck with the clerk's office in your ally, if you are paying the fee order. If your attorney is pay with a credit card or check officent, sign and attach the ents (Official Form 103A). | | | |
| _ F6 | | | | less pay Cha | aw, a ju than 19 the fee | dge may, but is not r 50% of the official po | equired to, verty line that ou choose th | waive your fee, a at applies to you iis option, you m | tion only if you are filing for Chapter 7. and may do so only if your income is ar family size and you are unable to sust fill out the Application to Have the with your petition. | | | |
| ba | ankrup | ou filed for otcy within the | ne | 2 No | | | | | | | | |
| la | st 8 ye | ears? | Ĺ | ⊶ Yes. | District | | When | MM / DD / YYYY | Case number | | | |
| | | | | | District | | When | | Case number | | | |
| | | | | | District | | 30 /h a v | | | | | |
| | | | | | District | *************************************** | When | MM / DD / YYYY | Case number | | | |
| | | bankruptcy | | 2 No | | | | | | | | |
| fil | ed by | ending or be a spouse wh | no is | Yes. | Debtor | *************************************** | ************************************** | | Relationship to you | | | |
| yo pa | ou, or l | iling this case with or by a business ner, or by an | | | | | | | Case number, if known | | | |
| aı | mate | | | | Debtor | | | | Relationship to you | | | |
| | | | | | | | When | | Case number, if known | | | |
| | | | | | | | | MM/DD/YYYY | | | | |
| | you r sidenc | ent your e? | | No. Yes. | Go to lii Has you | ne 12. ur landlord obtained an | eviction judgn | nent against you? | | | | |
| | | | | | | Go to line 12. | | | | | | |
| | | | | | | . Fill out <i>Initial Statemer</i> of this bankruptcy petit | | viction Judgment . | Against You (Form 101A) and file it as | | | |

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Doris Coburn Debtor 1 Case number (if known)_ Part 38 Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor 2 No. Go to Part 4. of any full- or part-time business? Yes. Name and location of business A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnership, or Number Street If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. City ZIP Code Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) ☐ None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your Chapter 11 of the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if Bankruptcy Code and any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. For a definition of small business debtor, see No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in 11 U.S.C. § 101(51D). the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any Z No property that poses or is ☐ Yes. What is the hazard? alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs If immediate attention is needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number City State ZIP Code

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Debtor 1

| Doris | Y. |
|------------|-------------|
| First Name | Middle Name |

Coburn

| Case number (if known) |
|------------------------|
| |
| |
| |
| |
| COC HURRIER IN Annuen |
| |

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| u | I am not required to receive a briefing about |
|---|---|
| | credit counseling because of: |

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances

rational decisions about finances.

Disability. My physical disability causes me

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military

duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

through the internet, even after I

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Debtor 1 | Doris Y First Name Middle Na | . Coburn | Case number (## | nown) | | | | | |
|-----------------------------|---|---|---|--|--|--|--|--|--|
| | | | | | | | | | |
| Parti 6: An | swer These Que | estions for Reporting Purp | oses | | | | | | |
| 16. What kind you have | d of debts do | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." | | | | | | | |
| y ou muro | • | No. Go to line 16b. Yes. Go to line 17. | <i>,</i> | , | | | | | |
| | | 16b. Are your debts prim money for a business or | arily business debts? Business debts investment or through the operation of the | are debts that you incurred to obtain business or investment. | | | | | |
| | | No. Go to line 16c. Yes. Go to line 17. | | | | | | | |
| | | 16c. State the type of debts y | ou owe that are not consumer debts or bu | siness debts. | | | | | |
| 17. Are you fi Chapter 7 | | ☐ No. I am not filing under | Chapter 7. Go to line 18. | | | | | | |
| any exem | Do you estimate that after any exempt property is excluded and administrative expenses | Yes. I am filing under Cha | pter 7. Do you estimate that after any exer ses are paid that funds will be available to | npt property is excluded and distribute to unsecured creditors? | | | | | |
| | | ☑ No | | | | | | | |
| are paid ti available t | nat funds will be for distribution red creditors? | e 🖵 Yes | | | | | | | |
| 18. How many | creditors do | ☑ 1-49 | 1,000-5,000 | 25,001-50,000 | | | | | |
| you estim | ate that you | 5 0-99 | 5,001-10,000 | 50,001-100,000 | | | | | |
| | | ☐ 100-199 ☐ 200-999 | 1 0,001-25,000 | ☐ More than 100,000 | | | | | |
| 19. How much | ı do you | 2 \$0-\$50,000 | □ \$1,000,001-\$10 million | —————————————————————————————————————— | | | | | |
| | our assets to | \$50,001-\$100,000 | \$10,000,001-\$10 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion | | | | | |
| De WORTH? | | \$100,001-\$500,000 | \$50,000,001-\$100 million | \$10,000,000,001-\$50 billion | | | | | |
| | er a recession of | □ \$500,001-\$1 million | □ \$100,000,001-\$500 million | ☐ More than \$50 billion | | | | | |
| 20. How much | do you our liabilities | \$0-\$50,000 | ☐ \$1,000,001-\$10 million | □ \$500,000,001-\$1 billion | | | | | |
| to be? | our nabinities | \$50,001-\$100,000 \$100,001-\$500,000 | ☐ \$10,000,001-\$50 million | \$1,000,000,001~\$10 billion | | | | | |
| | | \$500,001-\$1 million | □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million | ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion | | | | | |
| Parit 7: Sign | ı Below | | Thining t | wore than \$50 billion | | | | | |
| For you | | I have examined this petition, a correct. | and I declare under penalty of perjury that | the information provided is true and | | | | | |
| | | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. | | | | | | | |
| | | ans document, mave obtained | nd I did not pay or agree to pay someone v and read the notice required by 11 U.S.C. | § 342(b). | | | | | |
| | | I request relief in accordance w | ith the chapter of title 11, United States Co | ode, specified in this petition. | | | | | |
| | | I understand making a false sta with a bankruptcy case can res 18 U.S.C. §§ 152, 1341, 1519, | itement, concealing property, or obtaining ult in fines up to \$250,000, or imprisonmer and 3571. | money or property by fraud in connection of for up to 20 years, or both. | | | | | |
| | | x De | × | | | | | | |
| | | Signature of Debtor 1 | Signature | of Debtor 2 | | | | | |
| | | Executed on O7 /6 . | 20/8 Executed | On | | | | | |

MM / DD /YYYY

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Doris Debtor 1 Coburn Case number (if known) For you if you are filing this The law allows you, as an individual, to represent yourself in bankruptcy court, but you bankruptcy without an should understand that many people find it extremely difficult to represent attorney themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney. If you are represented by To be successful, you must correctly file and handle your bankruptcy case. The rules are very an attorney, you do not need to file this page. technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay. You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned. If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply. Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences? Q No **2** Yes Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned? ☐ No 2 Yes Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms? ☐ No Yes. Name of Person Tania Stoxstell Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

| | × |
|-----------------------------------|-----------------------|
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date 07 16 2018 | Date MM / DD / YYYY |
| Contact phone | Contact phone |
| Cell phone 773-540-7592 | Cell phone |
| Email address doris Coburn 36 Dgm | 2./.C.Email address |

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| Debtor 1 | Doris | Υ. | Coburn |
|-------------------|---------------------|-------------------------------|-----------|
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| Spouse, if filing | g) First Name | Middle Name | Last Name |
| United States | Bankruptcy Court fo | r the: Northern District of I | |

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| your original forms, you must fill out a new Summary and check the box at the top of this page. | amended delication after you me |
|---|---|
| Part 13 Summarize Your Assets | |
| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B 1b. Copy line 62, Total personal property, from Schedule A/B 1c. Copy line 63, Total of all property on Schedule A/B Part 23: Summarize Your Liabilities | \$ 10,999.00 |
| | |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule E. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F. Your total lia Part 3: Summarize Your Income and Expenses | \$ <u>0.00</u> + \$ <u>33,842.00</u> |
| 4. Schedule I: Your Income (Official Form 106I) | |
| Copy your combined monthly income from line 12 of Schedule I | <u>\$</u> \$ |
| 5. Schedule J: Your Expenses (Official Form 106J) | 0.405 |
| Copy your monthly expenses from line 22c of Schedule J | \$ 2,405.00 |

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| De | ebtor 1 | Doris First Name | Middle Name | Y. | st Name | Coburn | | Case number (if known) | | |
|----|--------------------|--|--|---------------------------|---|--|---|--|------------|---------------|
| P | art 4: | Answer The | ese Questi | ons for A | dministra | itive and Stat | tistical Reco | rds | | |
| 6. | Are you | u filing for bar | nkruptcy un | der Chapte | ers 7, 11, o | r 13? | | | | |
| | O No. | You have noth | ning to report | on this par | rt of the forr | n. Check this bo | x and submit thi | is form to the court with | your othe | er schedules. |
| 7. | What ki | nd of debt do | you have? | | | | | | | |
| | 2 You fami | ı r debts are pı ily, or househo | imarily consideration of the constant of the c | sumer deb 11 U.S.C. § | i ts. <i>Consun</i> § 101(8). Fil | ner debts are tho Il out lines 8-9g f | ose "incurred by for statistical pur | an individual primarily f rposes. 28 U.S.C. § 159 | for a pers | sonal, |
| | You this | r debts are no form to the cou | at primarily art with your | consumer other sched | debts . You dules. | have nothing to | report on this p | part of the form. Check t | ihis box a | and submit |
| 8. | From th Form 12 | e <i>Statement (</i> 12A-1 Line 11; | of Your Curr OR, Form 12 | ent Monthi 22B Line 11 | <i>ly Income</i> : ; OR, Form | Copy your total 122C-1 Line 14 | current monthly 1. | income from Official | | s3,150.00 |
| | | | | | | | | | | |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|---|--------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | s0 | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ <u> </u> | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | + \$0 | 0.00 |
| 9g. Total . Add lines 9a through 9f. | s0 | .00 |

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| Fill in t | his information to ider | ntify your case and th | is filing: | |
|----------------------|--|---|--|--|
| Debtor 1 | Doris | Υ. | Coburn | |
| Debiori | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, | f filing) First Name | Middle Name | Lost Name | |
| United S | States Bankruptcy Court for | the: Northern District o | f Illinois | |
| Case nu | | THORITICAL DISTRICT | Tamilois | |
| Ouse na | 111001 | | | ☐ Check if this is an |
| | | | | amended filing |
| Offic | cial Form 106 | 4/B | | |
| | hedule A/E | ************** | .V | 12/15 |
| respon | is where you think it it is is the supplying colour name and case number the supplying | ts best. Be as compl rrect information. If n mber (if known). Ans | is. List an asset only once. If an asset fits in more ete and accurate as possible. If two married peop nore space is needed, attach a separate sheet to t wer every question. Land, or Other Real Estate You Own or Ha | e than one category, list the asset in the ele are filing together, both are equally his form. On the top of any additional pages, |
| | | | | |
| | | gal or equitable intere | st in any residence, building, land, or similar pro | perty? |
| | lo. Go to Part 2. 'es. Where is the proper | 6.2 | | |
| - Const | es. where is the proper | ty r | What is the property? Check all that apply. | _ |
| | | | ☐ Single-family home | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: |
| 1,1, | Street address, if available | e, or other description | Duplex or multi-unit building | Creditors Who Have Claims Secured by Property. |
| | | , | Condominium or cooperative | Current value of the Current value of the |
| | | | Manufactured or mobile home Land | entire property? portion you own? |
| | | | ☐ Investment property | \$ 0.00 \$ 0.00 |
| | City | State ZIP Code | ☐ Timeshare | Describe the nature of your ownership |
| | , | 211 0006 | Other | interest (such as fee simple, tenancy by the entireties, or a life estate), if known. |
| | | | Who has an interest in the property? Check one. | |
| | | | Debtor 1 only | |
| | County | *************************************** | Debtor 2 only | |
| | | | Debtor 1 and Debtor 2 only | Check if this is community property (see instructions) |
| | | | At least one of the debtors and another | • |
| | | | Other information you wish to add about this it property identification number: | tem, such as local |
| If you | own or have more than | one, list here: | | |
| | | | What is the property? Check all that apply. | Do not deduct secured claims or exemptions. Put |
| 1.2. | | | ☐ Single-family home | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. |
| | Street address, if available | , or other description | Duplex or multi-unit building Condominium or cooperative | • |
| | | | Manufactured or mobile home | Current value of the entire property? Current value of the portion you own? |
| | | | ☐ Land | s 0.00 s 0.00 |
| | | | Investment property | * <u> </u> |
| | City | State ZIP Code | Timeshare | Describe the nature of your ownership interest (such as fee simple, tenancy by |
| | | | Other | the entireties, or a life estate), if known. |
| | | | Who has an interest in the property? Check one. | |
| | | | Debtor 1 only | |
| | County | | Debtor 2 only Debtor 1 and Debtor 2 only | |
| | | | At least one of the debtors and another | Check if this is community property (see instructions) |
| | | | | , |
| | | | Other information you wish to add about this item property identification number: | m, such as local |
| | | | - The state of the | |
| | | | | |

| Debtor : | | Υ. | Document Page 11 of 54 | tif leanum) | | | |
|--|---|---|--|--|---|--|--|
| | First Name Mid | idle Name Last Nam | e e | (v v v v v v v | | | |
| 1.3. | Street address, if availab | ale, or other description | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative | the amount of Creditors Wi | tho Have Clai alue of the | ed claims on ims Secured Current | mptions. Put Schedule D: by Property. value of th you own? |
| | *************************************** | | Manufactured or mobile home | citile bio | 0.00 | portion | you own? 0.0 |
| | | | Land | \$ | 0.00 | \$ | U.C |
| | City | State ZIP Code | ☐ Investment property ☐ Timeshare | Describe t | the nature | of vour ou | marchin |
| | J., | 5 mic 2% 500e | Other | interest (s | uch as fee lies, or a lif | simple, te | nancy by |
| | | | Who has an interest in the property? Check one. | | · | | |
| | Country | | Debtor 1 only | | | | |
| | County | | Debtor 2 only | | | | |
| | | | Debtor 1 and Debtor 2 only | Check i | if this is co | mmunity | property |
| | | | At least one of the debtors and another | (see ins | structions) | | |
| | | | Other information you wish to add about this it property identification number: | tem, such as l | ocal | | |
| Add t | he dollar value of the | portion you own for a | all of your entries from Part 1, including any entrie | es for pages | | | 0.0 |
| you ł | nave attached for Part | 1. Write that number | here. | | . | \$ | 0.0 |
| | Describe Your | | St in any vehicles, whether they are registered or | not2 include a | any vahioloo | | COSCUMENT OF THE PROPERTY OF T |
| you o | own, lease, or have leg | gat or equitable intere es. If you lease a vehicl | st in any vehicles, whether they are registered or le, also report it on Schedule G: Executory Contracts | not? Include a and Unexpired | any vehicles d Leases. | estatuania de la compania de la comp | alla est |
| you o l own Cars, | own, lease, or have leg that someone else drive vans, trucks, tractors | gat or equitable intere es. If you lease a vehicl | le, also report it on Schedule G: Executory Contracts | not? Include a and Unexpired | any vehicles d Leases. | 3 | escende de l'emples personales de l'emples de l'emples de l'emples de l'emples de l'emples de l'emples de l'emp |
| you o | own, lease, or have leg that someone else drive vans, trucks, tractors | gat or equitable intere es. If you lease a vehicl | le, also report it on Schedule G: Executory Contracts | not? Include a and Unexpired | any vehicles d Leases. | Eliferina de la constanta de l | |
| you o lown Cars, | own, lease, or have leg that someone else drive vans, trucks, tractors | gat or equitable intere es. If you lease a vehicl | le, also report it on Schedule G: Executory Contracts | and Unexpired | d Leases. | | ntions Dut |
| you o I own Cars, I No | own, lease, or have leg that someone else drive vans, trucks, tractors o es | gal or equitable intere es. If you lease a vehicl s, sport utility vehicles | le, also report it on Schedule G: Executory Contracts s, motorcycles Who has an interest in the property? Check one. | and Unexpired Do not deduct the amount of | d Leases. It secured claif | ims or exem I claims on S | Schedule D: |
| you o I own Cars, I No | own, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: | gal or equitable intereses. If you lease a vehicles, sport utility vehicles Chrysler 200 S | Who has an interest in the property? Check one. | and Unexpired Do not deduct | d Leases. It secured claif | ims or exem I claims on S | Schedule D: |
| you o own Cars, O No | own, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year: | cal or equitable interests. If you lease a vehicles sport utility vehicles a chrysler 200 S 2016 | le, also report it on Schedule G: Executory Contracts s, motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct the amount of Creditors Who | t secured claif f any secured o Have Claim ue of the | ims or exem I claims on S is Secured b Current v | Schedule D: by Property. Talue of the |
| you o rown Cars, No | own, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage: | gal or equitable intereses. If you lease a vehicles, sport utility vehicles Chrysler 200 S | Who has an interest in the property? Check one. | Do not deduct the amount of Creditors Who | t secured claif f any secured o Have Claim ue of the | ims or exem I claims on S is Secured b | Schedule D: by Property. Talue of the |
| you o rown Cars, No | own, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year: | cal or equitable interests. If you lease a vehicles sport utility vehicles a chrysler 200 S 2016 | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct the amount of Creditors Who Current valuentire proper | t secured claif f any secured o Have Claim ue of the | ims or exem I claims on S is Secured b Current v | Schedule D: y Property. raiue of the ou own? |
| you our own Cars, No. 20 Ye | own, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage: | cal or equitable intereses. If you lease a vehicles, sport utility vehicles Chrysler 200 S 2016 38,000 | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct the amount of Creditors Who Current valuentire proper | at secured clair f any secured o Have Claim fue of the erty? | ims or exem I claims on S Is Secured b Current v portion y | Schedule D: y Property. ratue of the ou own? |
| Cars, No Yes | own, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage: Other information: | cal or equitable intereses. If you lease a vehicles, sport utility vehicles Chrysler 200 S 2016 38,000 | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct the amount of Creditors Who entire proper | at secured claif any secured or Have Claim (ue of the erty? | ims or exem I claims on S Is Secured b Current v portion y | chedule D: y Property. ralue of the ou own? |
| Cars, Cars, Solve to the second sec | own, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage: Other information: | cal or equitable intereses. If you lease a vehicles, sport utility vehicles Chrysler 200 S 2016 38,000 | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct the amount of Creditors Who entire proper \$ 10, | at secured claif any secured of the erty? 340.00 | ims or exemical claims on Secured by Current version yes | chedule D: y Property. ralue of the ou own? 0.00 |
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| Cars, Cars, Side Year 3.1. | own, lease, or have leg that someone else drive vans, trucks, tractors of es. Make: Model: Year: Approximate mileage: Other information: own or have more than Make: Model: Year: | cal or equitable intereses. If you lease a vehicles, sport utility vehicles Chrysler 200 S 2016 38,000 | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | Do not deduct the amount of Creditors Who Do not deduct the amount of Creditors Who Current value amount of Creditors Who Current value Curren | at secured claif any secured or Have Claims any secured claims are secured or Have Claims any secured or Have Claims use of the | ims or exemicalized by Current value of the portion y \$ | chedule D: yy Property. ralue of the ou own? 0.00 otions. Put chedule D: y Property. alue of the |
| Cars, No. 3.1. If you. 3.2. | own, lease, or have leg that someone else drive vans, trucks, tractors of es. Make: Model: Year: Approximate mileage: Other information: own or have more than Make: Model: | cal or equitable intereses. If you lease a vehicles, sport utility vehicles Chrysler 200 S 2016 38,000 | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct the amount of Creditors Who Do not deduct the amount of Creditors Who Do not deduct the amount of Creditors Who | at secured claif any secured or Have Claims any secured claims are secured or Have Claims any secured or Have Claims use of the | ims or exem I claims on S Is Secured b Current v portion y \$ ms or exem claims on S Is Secured b | chedule D: y Property. ralue of the ou own? 0.00 otions. Put chedule D: y Property. alue of the |

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| | å fako. | Who has an interest in the war and A or | | | | |
|----------------------------------|---|---|---|--|--|--|
| 3.3. | Make: | Who has an interest in the property? Check one. Debtor 1 only | the amou | educt secured c ant of any secure | ed claims on | Schedule D: |
| | Model: | Debtor 2 only | Creditors | Who Have Cla | ims Secured | by Property. |
| | Year: | Debtor 1 and Debtor 2 only | Current | value of the | Current | value of the |
| | Approximate mileage: | At least one of the debtors and another | | roperty? | | you own? |
| | Other information: | | | 0.00 | | |
| | | ☐ Check if this is community property (see instructions) | \$ | 0.00 | \$ | 0.00 |
| 3.4. | Make: | Who has an interest in the property? Check one. | Do not de | educt secured ci | laima ar avad | meticas Dut |
| | Model: | Debtor 1 only | the amou | nt of any secure | ed claims on | Schedule D: |
| | ···· | Debtor 2 only | Creditors | Who Have Clai | ims Secured | by Property. |
| | Year: | Debtor 1 and Debtor 2 only | | value of the | Current | value of the |
| | Approximate mileage: | At least one of the debtors and another | entire p | roperty? | portion y | you own? |
| | Other information: | | | 0.00 | | 0.00 |
| | | Check if this is community property (see instructions) | \$ | 0.00 | \$ | 0.00 |
| | <i>ples:</i> Boats, trailers, motors, personal o | and other recreational vehicles, other vehicles, and access watercraft, fishing vessels, snowmobiles, motorcycle accessor | | | | |
| xan 1 N | ples: Boats, trailers, motors, personal oes Make: Model: | watercraft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not de | duct secured cla nt of any secured Who Have Clain | d claims on S | Schedule D: |
| xam 1 N 1 Y | ples: Boats, trailers, motors, personal ces Make: Model: Year: | watercraft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not dec the amour Creditors I | nt of any secured Who Have Clain | d claims on 3 ns Secured b | Schedule D: by Property. |
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| 1 N 1 Y 1.1. | ples: Boats, trailers, motors, personal ces Make: Model: Year: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not dec the amoun Creditors I | nt of any secured Who Have Clain value of the operty? | d claims on 5 ns Secured b Current v | Schedule D: by Property. value of the ou own? |
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| ixan 1 N 1 Y | ples: Boats, trailers, motors, personal or es Make: Model: Other information: own or have more than one, list here: Make: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. | Do not decitie amount. | nt of any secured who Have Clain value of the operty? 0.00 | d daims on Secured E Current v portion y \$ sims or exempt d claims on S | Schedule D: by Property. ralue of the ou own? 0.00 ptions. Put ichedule D: |
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| 1 N Y | ples: Boats, trailers, motors, personal or es Make: Model: Year: Other information: own or have more than one, list here: Make: Model: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not decitive profiles Current entire profiles Do not decitive amount | value of the operty? 0.00 duct secured clair tof any secured Who Have Claim value of the | d claims on S ns Secured b Current v portion y \$ ims or exempt claims on S ns Secured b | ptions. Put ichedule D: y Property. |
| you | ples: Boats, trailers, motors, personal or es Make: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only | Do not decitive profiles Do not decitive profiles Do not decitive amount Creditors V Current v Current v Current v | value of the operty? 0.00 duct secured clair tof any secured Who Have Claim value of the | d claims on S ns Secured to Current v portion y \$ ims or exemy d claims on S ns Secured b Current v | Schedule D: by Property. value of the ou own? 0.00 ptions. Put ichedule D: y Property. value of the |
| ixan 1 N 1 Y | ples: Boats, trailers, motors, personal or es Make: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this is community property? Check one. Check one. Check if this is community property? | Do not decitive amount of the the amount of the | nt of any secured Who Have Claim value of the operty? 0.00 duct secured dia t of any secured who Have Claim value of the operty? | d claims on S ns Secured to Current v portion y \$ ims or exemy d claims on S ns Secured b Current v | schedule D: by Property. value of the ou own? 0.00 ptions. Put chedule D: by Property. alue of the ou own? |

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Debtor 1

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Debtor 1

Doris

Document

Case number (if known)

Part 3:

Describe Your Personal and Household Items

| Do you own or have any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims |
|--|--|
| 6. Household goods and furnishings | or exemptions. |
| Examples: Major appliances, furniture, linens, china, kitchenware | |
| □ No | |
| 2 Yes. Describe Household Furniture | |
| - Tool Section Furniture | \$500.00 |
| 7. Electronics | |
| Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; n | aunia. |
| collections; electronic devices including cell phones, cameras, media players, games | nusic |
| □ No | |
| Yes. Describe | 200.00 |
| Cell Phone and TV | \$200.00 |
| 8. Collectibles of value | |
| Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No | |
| Yes. Describe | |
| The best best best best best best best bes | \$ |
| 9. Equipment for sports and hobbies | |
| Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; ca and kayaks; carpentry tools; musical instruments | inoes |
| ☑ No | |
| Yes, Describe | s 0.00 |
| | \$0.00 |
| 10. Firearms | |
| Examples: Pistols, rifles, shotguns, ammunition, and related equipment | |
| ☑ No | |
| Yes. Describe | \$ 0.00 |
| | ····· |
| 11. Clothes | |
| Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No | |
| to at the form of the control of the | |
| ☑ Yes. Describe Clothing For Me and My Dependants | \$1,500.00 |
| | |
| 12. Jewelry | |
| Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gen gold, silver | ns, |
| □ No | *************************************** |
| ☑ Yes, Describe Jewelry | \$ 500.00 |
| 13. Non-farm animals | |
| Examples: Dogs, cats, birds, horses | |
| | |
| ☑ No | and the second second |
| Yes. Describe | \$0.00 |
| 14. Any other personal and household items you did not already list, including any health aids you did not lis | |
| | ı. |
| ☑ No | |
| Yes. Give specific | s 0.00 |
| information | Ψ |
| 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached | 2700.00 |
| for Part 3. Write that number here | \$ 2,700.00 |

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Debtor 1

Part 4:

Doris

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Case number (if known)

Describe Your Financial Assets

Last Name

| Do you own or have an | y legal or equitable interest in | any of the following? | portion y | uct secured clair |
|--|---|---|-----------|-------------------|
| 16. Cash <i>Examples:</i> Money you | u have in your wallet, in your ho | me, in a safe deposit box, and on hand when you file your petition | | |
| 2 No | | | | |
| Q Yes | | Cash: | ¢. | 0.00 |
| | | Odair | \$ | |
| and other | savings, or other financial acco similar institutions. If you have r | unts; certificates of deposit; shares in credit unions, brokerage houses nultiple accounts with the same institution, list each. | , | |
| No Ves | | Institution name: | | |
| | 17.1. Checking account: | First Midwest Bank | \$ | 0.00 |
| | 17.2. Checking account: | | e | 0.00 |
| | 17.3. Savings account: | | Ψ | 0.00 |
| | 17.4. Savings account: | | ф | 0.00 |
| | 17.5. Certificates of deposit: | | 3 | 0.00 |
| | 17.6. Other financial account: | | 5 | 0.00 |
| | 17.7. Other financial account: | | \$ | 0.00 |
| | 17.8. Other financial account: | | \$ | 0.00 |
| | 17.9. Other financial account: | | \$ | 0.00 |
| | | | \$ | 0.00 |
| | or publicly traded stocks investment accounts with brok Institution or issuer name: | erage firms, money market accounts | | |
| | | | \$ | 0.00 |
| | | | \$ | 0.00 |
| | \$ | | \$ | 0.00 |
| 19. Non-publicly traded s an LLC, partnership, a No Yes. Give specific information about them | tock and interests in incorpo and joint venture Name of entity: | rated and unincorporated businesses, including an interest in | \$ | 0.00 |
| | | 0% % | \$ | 0.00 |

Entered 07/16/18 15:47:27 Case 18-19848 Doc 1 Filed 07/16/18 Desc Main Document Page 15 of 54 Debtor 1 Case number (if known) 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. 2 No Yes. Give specific issuer name: information about 0.00 them..... 0.00 0.00 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Z No Yes. List each account separately. Type of account: Institution name: 0.00 401(k) or similar plan: 0.00 Pension plan: 0.00 IRA: Retirement account: 0.00 0.00 Keogh: 0.00 Additional account: Additional account: 0.00 22 Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☐ No **Ø** Yes..... Institution name or individual: Electric: 0.00 Gas 0.00 Heating oil: 0.00 Security deposit on rental unit: ____ 0.00 Prepaid rent: 400.00 Telephone: 0.00 Water: 0.00 Rented furniture: 0.00 Other: 0.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) Z No Yes Issuer name and description: 0.00

0.00

Document Page 16 of 54 Debtor 1 Case number (if known) 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). 0.00 0.00 0.00 0.00 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit **Ø** No ☐ Yes. Give specific information about them.... 0.00 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements Z No Yes. Give specific information about them.... 0.00 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses Z No ☐ Yes. Give specific information about them.... 0.00 Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ No Yes. Give specific information 2017 Tax Return 6,860.00 Federal: about them, including whether you already filed the returns 1.039.00 State: and the tax years..... 0.00 Local 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ZI No Yes. Give specific information..... 0.00 Alimony: 0.00 Maintenance: 0.00 Support: 0.00 Divorce settlement: 0.00 Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else 2 No Yes. Give specific information..... 0.00

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Doc 1

Doc 1 Filed 07/16/18 Entered 07/16/18 15:47:27 Document, Page 17 of 54 Debtor 1 Case number (if known) 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance 2 No Yes. Name the insurance company Company name: Beneficiary: of each policy and list its value... Surrender or refund value. 0.00 0.00 0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. Z No ☐ Yes. Give specific information..... 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue Yes. Describe each claim. 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims 2 No Yes. Describe each claim..... 0.00 35. Any financial assets you did not already list Z No ☐ Yes. Give specific information..... 0.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here 8.299.00 Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. Part 5: 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned Z No Yes. Describe..... 0.00 39. Office equipment, furnishings, and supplies

Yes. Describe......

2 No

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

0.00

| Debtor 1 | Case 18 Doris First Name | -19848 | Doc 1 Y. | Filed 07/16/18 Document | Entered 07/16/18 15:47:27 Page 18 of 54 Case number (# known) | Desc Main | |
|----------------------|---|-----------------------------|---------------------------|---|---|---|------|
| er Kilonobi | mama disahasan | | | | | | |
| 40. WACH | | quipment, s | upplies you | use in business, and to | pols of your trade | | |
| | s. Describe | | | | | | |
| | | | | | | \$ | 0.00 |
| 41. Invent | | | | | | | |
| wed 10 | s. Describe | | | | | \$ | 0.00 |
| ₩ No | | | | | | | |
| Lad Ye | s. Describe | Name of enti | ity: | | % of ownership | p: | |
| | | *** | | | % | \$ | 0.00 |
| | | | | | A A A A A A A A A A A A A A A A A A A | \$ | 0.00 |
| | | | | | % | \$ | 0.00 |
| 43. Custon | ner lists, mailing | g lists, or ot | her compila | tions | | | |
| | ☐ No | | onally ident | ifiable information (as o | defined in 11 U.S.C. § 101(41A))? | | |
| | Yes. Descr | ibe | | | | | 0.00 |
| | | | | | | a | 0.00 |
| Mo No | siness-related p | property you | ı did not alre | eady list | | | |
| | mation | | ···· | | | \$ | 0.00 |
| | | | | | | \$ | 0.00 |
| | | | **** | | | \$ | 0.00 |
| | | | | | | \$ | 0.00 |
| | , | | ***** | | | \$ | 0.00 |
| | | ···· | | | | \$ | 0.00 |
| 45. Add the for Part | e dollar value of 5. Write that nu | all of your e umber here | entries from | Part 5, including any e | ntries for pages you have attached | \$ | 0.00 |
| | | | | | | | |
| Part 6: | Describe Any If you own or h | y Farm- an nave an inte | d Commer rest in farmi | cial Fishing-Related and, list it in Part 1. | Property You Own or Have an Interest | t In. | |
| 46. Do you | own or have any Go to Part 7. | y legal or eq | uitable inte | rest in any farm- or com | mercial fishing-related property? | | T |
| | Go to line 47. | | | | | | |
| | | | | | | Current value of portion you ow Do not deduct sectors | n? |
| 47. Farm an | - | <i>.</i> | | | | or exemptions. | |
| Example No | s: Livestock, pou | ultry, farm-rai | sed fish | | | | |
| | *************************************** | | | | | | |
| | | | | | | | 0.00 |
| | | | | | | \$ | 0.00 |

| Debtor 1 | Doris Y. DOCU First Name Middle Name Last Name | Resolution Page 19 of 54 Case number (# known) | | |
|-----------------------------|---|---|---------------------------------------|---|
| 48 Crons | either growing or harvested | | | |
| 2 No | other growing or narvested | | | |
| Yes. | Give specific mation | | | 0.00 |
| | | | \$ | 0.00 |
| ₩ No | d fishing equipment, implements, machinery, fix | | | |
| Yes. | | | | |
| | | | \$ | 0.00 |
| 50. Farm an Z INo | d fishing supplies, chemicals, and feed | | | |
| | | en e | | |
| | | | | 0.00 |
| 51. Any farm | n- and commercial fishing-related property you o | lid not already liet | Þ | |
| ₩2 No | | | | |
| Yes. | Give specific nation | | | 0.00 |
| 52 Add the | dollar value of all of your autitor for an D | | <u>\$</u> | 0.00 |
| for Part (| dollar value of all of your entries from Part 6, inc 3. Write that number here | luding any entries for pages you have attached | \$ | 0.00 |
| | | • | <u> </u> | |
| Part 7: | Describe All Property You Own or Ha | ve an Interest in That You Did Not List Abov | 57 4 | |
| | ave other property of any kind you did not alrea | | _ | |
| Examples: | Season tickets, country club membership | | | |
| Ø No □ ∨or (| Give specific | | _ | 0.00 |
| inform | ation | in the second | \$ | 0.00 |
| | | | \$ \$ | 0.00 |
| m. 5 • 1 • 1 | | | · · · · · · · · · · · · · · · · · · · | **** |
| 54. Add the d | ollar value of all of your entries from Part 7. Writ | e that number here | \$ | 0.00 |
| | | | | |
| Part 8: | ist the Totals of Each Part of this Fo | rm | | |
| 55. Part 1: To | tal real estate, line 2 | | » \$ | 0.00 |
| | al vehicles, line 5 | \$0.00 | | *************************************** |
| 57. Part 3: Tot | al personal and household items, line 15 | \$2,700.00 | | |
| 58. Part 4: Tot | al financial assets, line 36 | \$8,299.00 | | |
| 59. Part 5: Tot | al business-related property, line 45 | \$0.00 | | |
| 60. Part 6: Tot | al farm- and fishing-related property, line 52 | \$ | | |
| 61. Part 7: Tot | al other property not listed, line 54 | + \$ | | |
| 62. Total perso | onal property. Add lines 56 through 61 | \$ Copy personal property total | +\$1 | 0,999.00 |
| 63. Total of all | property on Schedule A/B. Add line 55 + line 62 | | 1, 1, | 1 aga nn |
| | | | \$ 10 | 0,999.00 |

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63.

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| Fill in | this inform | nation to identify your case | | | | | |
|---|------------------------------|--|-------------------------------------|--------------------------------|----------------------------|-----------------------------|---|
| Debtor | | | Cot | ourn | | | |
| Debtor | | Name Middle Nai | ne Last N | ame | | | |
| (Spouse | , if filing) First I | Name Middle Nar | me Last N | ame | | | |
| United | States Bankr | ruptcy Court for the: Northern Di | istrict of Illinois | | | | |
| Case n (If know | | | | | | | ck if this is a |
| Offic | ial For | m 106C | | | | | |
| *************************************** | ···· | e C: The Pro | operty Yo | u Claim | as Exemn | • | 04/16 |
| | | accurate as possible. If two | | | | | |
| using the space is | e property y needed, fill | you listed on Schedule A/B: F out and attach to this page a number (if known). | Property (Official Form | 106A/B) as your soul | rce, list the property tha | t vou claim as evennt. If i | more |
| | | | at vou must specify | the amount of the su | | | |
| specific | dollar amo | roperty you claim as exempount as exempt. Alternative | ly, you may claim th | e full fair market valı | ue of the property being | a exempted up to the a | mount |
| or any a | pplicable s | tatutory limit. Some exemp | tions—such as thos | e for health aids, rig | hts to receive certain | benefits, and tax-exemi | nt |
| imits th | nt tunas e exemptic | may be unlimited in dollar on to a particular dollar amo | amount. However, if | you claim an exemp | otion of 100% of fair m | arket value under a law | that |
| would b | e limited to | the applicable statutory a | mount. | tate property is dete | animed to exceed tha | t amount, your exemption | on |
| | | | | | | | |
| Part 1 | 3 Identi | fy the Property You Cla | im as Exempt | | | | |
| 1. Whi | ch set of e | xemptions are you claimin | 3? Check one only ex | en if vour soouse is f | iling with you | | |
| | | iming state and federal nonb | | | | | |
| A. | You are cla | iming federal exemptions. 11 | I U.S.C. § 522(b)(2) | | o, | | |
| | | | | | | | |
| 2. For | any proper | ty you list on Schedule A/E | 3 that you claim as e | xempt, fill in the info | rmation below. | | |
| Bri Sc | ef descripti hedule A/B | on of the property and line o that lists this property | n Current value of t | he Amount of the | exemption you claim | Specific laws that allow | w exemption |
| | | | Copy the value from Schedule A/B | m Check only one | box for each exemption. | | |
| Brie des | f cription: | HouseHold | \$ 500.00 | ☑ \$ 500.00 | | 735 ilcs 5/12-1001 | (b) |
| Line | from | 6 | | ☐ 100% of fai | r market value, up to | | . , |
| Sch | edule A/B: | 6 | | any applica | ble statutory limit | | *************************************** |
| Brie | | Electronics | \$ 200.00 | ☑ \$ 200.00 | | 735 ilcs 5/12-1001 | (b) |
| | cription: from | | \$200.00 | | r market value, up to | 733 1105 3/12-100 11 | (υ) |
| | edule A/B: | | | | ble statutory limit | | |
| Brief | f cription: | Clothing | \$ 1,500.00 | ∅ _{\$} 1,500.0 | 00 | 735 ilcs 5/12-1001 | (a) |
| | from | - · · · · · · · · · · · · · · · · · · · | | | r market value, up to | | / |
| Sche | edule A/B: | .11 | | | ble statutory limit | | |
| 3. Are y | you claimir | ng a homestead exemption | of more than \$160.3 | 75? | | | |
| (Sub | ject to adjus | stment on 4/01/19 and every | | | the date of adjustment. |) | |
| Z N | lo | | | | | | |
| Ŭ Y | es. Did you | acquire the property covere | d by the exemption wi | thin 1,215 days before | e vou filed this case? | | |

No Yes

Case 18-19848

Document

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Debtor 1

Doris

Middle Name

Last Name

Coburn

Case number (if known)_

Additional Page

| | - Charles and the second secon | | | allering response to the second secon | |
|---|--|--------------------------------------|--|--|--|
| Brief description of the property and line on Schedule A/B that lists this property | | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption | |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | | |
| Brief description: | Jewelry | \$ 500.00 | — Y | 735 ilcs 5/12-1001(b) | |
| Line from Schedule A/B. | 12 | | ☐ 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | Automobile | \$0.00 | | 735 ilcs 5/12-1001(c) | |
| Line from Schedule A/B: | 3.1 | | 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | Tax Return | \$6,860.00 | D \$ | 735 ilcs 5/12-1001(b) | |
| Line from Schedule A/B: | 28 | | 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | Security Deposit | \$400.00 | ₫ \$ 400.00 | 735 ilcs 5/12-1001(b) | |
| Line from Schedule A/B: | 22 | | ☐ 100% of fair market value, up to any applicable statutory limit | *************************************** | |
| Brief description: | Checking Account | \$0.00 | ☑ s0.00 | 735 ilcs 5/12-1001(b) | |
| Line from Schedule A/B: | <u>17</u> | | ☐ 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | W | \$ | Q \$ | | |
| Line from Schedule A/B: | | | ☐ 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | | \$ | Q \$ | | |
| Line from Schedule A/B: | | | ☐ 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | WARRANTE TO THE PROPERTY OF TH | \$ | Q \$ | | |
| Line from Schedule A/B: | whet for manager as | | ☐ 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | | \$ | G \$ | | |
| Line from Schedule A/B: | - | | ☐ 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | | \$ | <u> </u> | | |
| Line from Schedule A/B: | | | ☐ 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | | \$ | Q \$ | | |
| Line from Schedule A/B: | NATE CONTRACTOR OF THE PARTY OF | | 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | | \$ | Q \$ | | |
| Line from Schedule A/B: | | | 100% of fair market value, up to any applicable statutory limit | | |

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| | | Document | Tage ZZ OT 34 | | | |
|--|---|---|--|---|--|-----------------|
| Fill in this in | formation to identify your | Case: | | | | |
| Debtor 1 | | ۲. Coburr | | | | |
| Debtor 2 (Spouse, if filing) | | ddie Name Last Name | | | | |
| | Bankruptcy Court for the: North | Edde (44)110 | I I | | | |
| | cannapies Coart for tile. 1401ti | em district of minors | | | | |
| Case number (If known) | | | ļ | | ☐ Chec | k if this is an |
| | | | | | | ded filing |
| Official I | Form 106D | | | | | |
| Sched | ule D: Credite | ors Who Have (| Claims Secur | ed by Pro | pertv | 12/15 |
| Be as comple information. additional pa 1. Do any cre | ete and accurate as possil If more space is needed, o ges, write your name and ditors have claims secure | ole. If two married people are opy the Additional Page, fill i case number (if known). | filing together, both are ed t out, number the entries, | qually responsible and attach it to this | for supplying corre s form. On the top o | |
| U No. Che ✓ Yes, Fill | eck this box and submit this in all of the information bel | form to the court with your other | r schedules. You have nothi | ng else to report on | this form. | |
| 205 - 1110 - 1210 - 1210 - 1210 - 1210 - 1210 - 1210 - 1210 - 1210 - 1210 - 1210 - 1210 - 1210 - 1210 - 1210 - | | ,,,,, | | | | |
| Part 1: Lis | t All Secured Claims | CANADA | | | | |
| As much as | im. It more than one credito | s more than one secured claim, r has a particular claim, list the lphabetical order according to t | other creditors in Dart 2 | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | |
| | Rock Finance | Describe the property that | secures the claim: | s1,425.00 | s 1,425.00 | s 0.00 |
| Creditor's Nam 7639 631 | | | | | | • |
| Number | Street | | | | | |
| | | As of the date you file, the | claim is: Check all that apply. | | | |
| Summit City | IL 60501 State ZIP Code | Contingent Unliquidated Disputed | | | | |
| Who owes the | debt? Check one. | Nature of lien. Check all that | anniv | | | |
| Debtor 1 or | • | An agreement you made (| | | | |
| Debtor 2 on Debtor 1 an | • | car loan) | | | | |
| | of the debtors and another | Statutory lien (such as tax Judgment lien from a laws) | llen, mechanic's lien) uit | | | |
| | nis claim relates to a | Other (including a right to o | | | | |
| communit | y debt | | | | | |
| 1 2 2 | incurred <u>08/02/2016</u> | Last 4 digits of account nur | | | | |
| American Creditor's Name | Credit Acceptance | Describe the property that | secures the claim: | 19,764.00 | s19,764.00 | \$0.00 |
| 961 E. Ma | ain Street | 2016 Chrysler 200 S | | | | |
| | | As of the date you file, the | laim is: Check all that apply. | | | |
| Spartanbi | urg SC 29302 | Contingent Unliquidated | | | | |
| City | State ZIP Code | _ Uniquidated Disputed | | | | |
| | debt? Check one. | Nature of lien. Check all that a | apply. | | | |
| Debtor 1 onl | | An agreement you made (s | | | | |
| Debtor 2 onl | | car loan) | | | | |
| At least one | of the debtors and another | Statutory fien (such as tax li Judgment lien from a lawsu | | | | |
| | is claim relates to a | Other (including a right to of | | | | |
| Date debt was | incurred 03/01/2017 | Last 4 digits of account num | ber_1 0 0 1 | | | |
| | | Column A on this page, Write | | 21.189.00 | | ÷ |

Case 18-19848 Doc 1 Filed 07/16/18 Entered 07/16/18 15:47:27 Desc Main Page 23 of 54 Document Fill in this information to identify your case: Doris Coburn Debtor 1 First Name Miridie Name (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an (If known) amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). **List All of Your PRIORITY Unsecured Claims** 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Q Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amount amount Last 4 digits of account number \$ 0.00 \$ 0.00 \$ Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another ☐ Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other, Specify ☐ No ☐ Yes 2.2 Last 4 digits of account number 0.00 \$ 0.00 s Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated ☐ Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated is the claim subject to offset? Other, Specify ☐ No Q Yes

| Dei | Case 18-19848 D | | Filed 07/16/1 Documentr | | Main |
|-----|--|------------------------------|---|---|-----------------------|
| Pa | 15124 List All of Your NONPRIC | ORITY Ur | secured Claims | ; | |
| 4. | nonpriority disectived claim, list the ch | this part. Si ed claims i | ubmit this form to the name of the alphabetical rately for each clair | order of the creditor who holds each claim. If a creditor h | فالسياما مقاللهم |
| | claims fill out the Continuation Page of | saitoi noias | a particular claim, | list the other creditors in Part 3.If you have more than three r | ionpriority unsecured |
| 4.1 | FIRST PREMIER Nonpriority Creditor's Name | | | Last 4 digits of account number 2 1 0 2 | Total claim |
| | 3820 N Louise Ave | | | When was the debt incurred? 12/15/2014 | \$ 707.00 |
| | Sioux Falls City | SD State | 57107 ZIP Code | " As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and anothe | | ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| | ☐ Check if this claim is for a commuls the claim subject to offset? ✓ No ☐ Yes | unity debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debt Other. Specify Collections Account | s. |
| 4.2 | DUKE AND DUKE MANAGEM Nonpriority Creditor's Name 1015 W North Ave | MENT | | Last 4 digits of account number $\frac{2}{05/04/2018}$ When was the debt incurred? $\frac{2}{05/04/2018}$ | \$ 1,121.00 |
| | Number Street Villa Park | IL. | 60181 | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | State | ZIP Code | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| | ☐ Check if this claim is for a commuls the claim subject to offset? ☑ No ☐ Yes | nity debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account | š |
| 4.3 | CORNERSTONE ACCEPTAN Nonpriority Creditor's Name 3741 S Nova Rd Number Street | ICE | | Last 4 digits of account number 1 0 0 1 When was the debt incurred? 10/04/2013 | \$14,404.00 |
| | Port Orange | FL State | 32129 ZIP Code | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | 3 200.60 | In code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and anotherCheck if this claim is for a community | ity deht | | ☐ Student loans | |
| | ls the claim subject to offset? ☑ No ☐ Yes | woul | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Collections Account</u> | |

Debtor 1

Part 2:

Doris

Your NONPRIORITY Unsecured Claims - Continuation Page

| | | COLUMN TO SERVICE DE LA COLUMN DE | | | |
|-----|--|---|-------------------|--|---|
| Af | ter listing any entries on this page, n | umber th | em beginning with | 4.4, followed by 4.5, and so forth. | Total claim |
| 4.4 | FINGERHUT/WEBBANK Nonpriority Creditor's Name | | | Last 4 digits of account number 9 3 0 9 | s 100.00 |
| | 6250 Ridgewood Rd | | | When was the debt incurred? 02/14/2014 | *************************************** |
| | Number Street Saint Cloud | MN | 56303 | As of the date you file, the claim is: Check all that apply. | |
| | City | State | ZIP Code | ☐ Contingent | |
| | Who incurred the debt? Check one. | | | ☐ Unliquidated | |
| | Debtor 1 only | | | ☐ Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | ☐ Student loans | |
| | At least one of the debtors and anothe | | | Obligations arising out of a separation agreement or divorce that | at |
| | Check if this claim is for a commu | inity debt | | you did not report as priority claims | |
| | Is the claim subject to offset? | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify_Collections Account | • |
| | No Yes | | | | |
| 4.5 | e de la companya del companya de la companya del companya de la co | to be the con- | | | |
| | Medical Business Bureau Nonpriority Creditor's Name | | | Last 4 digits of account number 2 4 1 5 | <u>\$ 500.00</u> |
| | 1460 Renaissance Dr # 400 | · | | When was the debt incurred? 07/15/2016 | |
| | Park Ridge | IL | 60068 | As of the date you file, the claim is: Check all that apply. | |
| | City | State | ZIP Code | ☐ Contingent | |
| | Who incurred the debt? Check one. | | | Unliquidated | |
| | Debtor 1 only | | | ☐ Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that | : |
| | ☐ Check if this claim is for a commu | nity debt | | you did not report as priority claims | |
| | Is the claim subject to offset? | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify_Collections Account | |
| | Ø No | | | • | |
| | Yes | | | | |
| 4.6 | | | | | s 931.00 |
| | Sprint Wireless | | | Last 4 digits of account number 2 7 9 5 | \$ |
| | Nonpriority Creditor's Name | | | When was the debt incurred? 09/16/2017 | |
| | 6391 Sprint Parkway Number Street | | | makes and any fine of the first | |
| | Overland Park | KS | 66251 | As of the date you file, the claim is: Check all that apply. | |
| | City | State | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | | ☐ Unliquidated ☐ Disputed | |
| | Debtor 1 only | | | Lisputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | ☐ Student loans | |
| | | | | Obligations arising out of a separation agreement or divorce that | |
| | Check if this claim is for a commun | ity debt | | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | | Other. Specify Collections Account | |
| | ☑ No ☑ Yes | | | · · · · · · · · · · · · · · · · · · · | |

| Debtor | 1 |
|--------|---|
|--------|---|

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

| ATT | er usung any entries on this page, | number th | em beginning wit | h 4.4, followed by 4.5, and so forth. | Total claim |
|-----|--|------------|------------------|---|-----------------|
| 4.7 | Illinois Lending Corporations Nonpriority Creditor's Name | } | | Last 4 digits of account number 9 6 8 1 | \$_1,000.00 |
| | 15826 South La Grange Roa | ad | | When was the debt incurred? 02/01/2017 | |
| | Orland Park, IL 60462 | IL | 60462 | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim is for a comm Is the claim subject to offset? | | ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account | |
| 4.8 | Yes | | | | |
| L1 | Advance America Nonpriority Creditor's Name | | | Last 4 digits of account number 5 7 2 4 | s <u>180.00</u> |
| | 135 North Church Street | | | When was the debt incurred? 08/01/2016 | |
| | Spartanburg | sc | 29306 | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim is for a commu | | ZIP Code | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Is the claim subject to offset? No Yes | anity ubbe | | Debts to pension or profit-sharing plans, and other similar debts Other, Specify Collections Account | |
| 4.9 | | | | the control of the second of the control of the second of | s 1,500.00 |
| | America's Financial Choice In | С. | | Last 4 digits of account number 1 5 1 6 | \$ 1,000.00 |
| | 2 Madison St. 2nd Floor | | | When was the debt incurred? 03/02/2017 | |
| | Number Street Oak Park | IL | 60302 | As of the date you file, the claim is: Check all that apply. | |
| 1 | Oity Who incurred the debt? Check one. | State | ZIP Code | Contingent Unliquidated Disputed | |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commu | | | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| l | s the claim subject to offset? No Yes | 4001 | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account | |

Debtor 1

Part

| 4 | Your | NONPRIORITY | Unsecured | Claims - | - Continuation | Page |
|---|------|-------------|-----------|----------|----------------|------|
|---|------|-------------|-----------|----------|----------------|------|

| Γ | ter listing any entries on this page, | number the | em beginning with | 4.4, followed by 4.5, and so forth. | Total claim |
|-------|--|----------------|-------------------|---|--|
| 5.0 | Banquet Financial (Small Co | nsumer l | Loans) | Last 4 digits of account number 9 7 2 2 | \$ <u>1,500.00</u> |
| | 607 Dundee Avenue | | | When was the debt incurred? 12/02/2016 | A Comment of the Comm |
| | Number Street Elgin | IL. | 60120 | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothed Check if this claim is for a commuls the claim subject to offset? | State State | ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account | |
| 5.1 | ☐ Yes Certegy | · . | | Last 4 digits of account number 2 1 0 2 | s0.00 |
| | Nonpriority Creditor's Name 11601 Roosevelt Blvd. N. | | | When was the debt incurred? 01/02/2012 | |
| | Number Street St. Petersburg | F-1 | 20740 | As of the date you file, the claim is: Check all that apply. | |
| | City | FL State | 33716 ZIP Code | ☐ Contingent | |
| | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim is for a commit is the claim subject to offset? No Yes | | | Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account | |
| اج ما | | | | | |
| 5.2 | Chex Systems Nonpriority Creditor's Name | | | Last 4 digits of account number 2 1 0 2 | \$0.00 |
| | 7805 Hudson Road | | | When was the debt incurred? 01/02/2012 | |
| | Number Street Woodberry | MN | 55125 | As of the date you file, the claim is: Check all that apply. | |
| | City Who incurred the debt? Check one. | State | ZIP Code | ☐ Contingent ☐ Unliquidated ☐ Disputed | |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commu | | | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Is the claim subject to offset? No Yes | my debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account | |

Debtor 1

Part 2e

Your NONPRIORITY Unsecured Claims - Continuation Page

| Af | ter listing any entries on this page, num า | nber the | m beginning wit | h 4.4, followed by 4.5, and so forth. | Total claim |
|-------|---|-------------|---|---|-------------|
| 5.3 | Illinois Tollway Nonpriority Creditor's Name | | | Last 4 digits of account number 2 1 0 2 | s 4,000.00 |
| | 2700 Ogden Avenue | | | When was the debt incurred? 10/02/2016 | * |
| | Number Street Downers Grove | IL. | 60515 | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a communit is the claim subject to offset? No Yes | state | ZIP Code | □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Collections Account | |
| 5.4 | Secretary of State | | | Last 4 digits of account number 2 1 0 2 | \$ 0.00 |
| | Nonpriority Creditor's Name | | *************************************** | When was the debt incurred? 07/12/2018 | \$ |
| | 2701 S. Dirksen Parkway Number Street | | | | |
| | | Late | 62723 ZIP Code | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community is the claim subject to offset? | / debt | | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Notice | |
| | No D Yes | | | Collor opening | |
| 5.5 | | | | | |
| [0:0] | City of Chicago Dept of Finance Nonpriority Creditor's Name | | · · · · · · · · · · · · · · · · · · · | Last 4 digits of account number 2 1 0 2 | \$ 4,000.00 |
| | P.O. Box 4641 Number Street | | | When was the debt incurred? 01/02/2015 | |
| | Chicago | _ | 60680 | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check one. Debtor 1 only | ite | ZIP Code | Contingent Unliquidated Disputed | |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that | |
| | ☐ Check if this claim is for a community is the claim subject to offset? ☐ No ☐ Yes | debt | | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Parking Fine & Fees | |

| Deb | Caso otor 1 Dori | - | Doc 1 Y. | Filed 07/16/18 Document | | ain |
|---------|-------------------------|--|---------------|----------------------------|--|-------------|
| Pa | nd2⊧ Your | NONPRIORITY | Unsecured (| Claims — Continuat | ion Page | |
| Aft | ter listing any | entries on this pag | ge, number th | em beginning with 4.4 | 1, followed by 4.5, and so forth. | Total claim |
| 5.6 | Equifax Ba | ankruptcy Depa | rtment | | Last 4 digits of account number 2 1 0 2 | \$0.00 |
| | P.O. Box | 740241 | | | When was the debt incurred? 01/01/2012 | |
| | Atlanta | itreet | GA | 30374 | As of the date you file, the claim is: Check all that apply. | |
| | Debtor 1 or | | State ne. | ZIP Code | Contingent Unliquidated Disputed | |
| | Debtor 2 or Debtor 1 ar | ily id Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | of the debtors and ar | | | Student loans Obligations arising out of a separation agreement or divorce the you did not report as priority claims | |
| | | ubject to offset? | • | | Debts to pension or profit-sharing plans, and other similar debt Other. Specify Collections Account | 'S |
| 5.7 | Experian B | ankruptcy Depa | arment | | Last 4 digits of account number 2 1 0 2 | \$0.00 |
| | P.O. Box 2 | 002 | *** | | When was the debt incurred? 01/01/2012 | |
| | Allen | reet | TX | 75013 | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred | the debt? Check one | State 9. | ZIP Code | Contingent Unliquidated Disputed | |
| | Debtor 1 onl | | | | • | |
| | Debtor 1 and | | | | Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one | of the debtors and and is claim is for a cor | | | Student loans Obligations arising out of a separation agreement or divorce the you did not report as priority claims | at |
| | | bject to offset? | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account | • |
| 5.8 | | • | | | the second of th | |
| <u></u> | TransUnion | Bankruptcy De | epartment | WW. | Last 4 digits of account number 2 1 0 2 | \$0.00 |
| | P.O. Box 10 | 000 | | | When was the debt incurred? 01/01/2012 | |
| | Number Str Chester | eet | PA | 19022 | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred t | he debt? Check one | State | ZIP Code | ☐ Contingent ☐ Unliquidated ☐ Disputed | |

☑ No ☐ Yes

Debtor 1 only
Debtor 2 only

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

lacksquare Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Collections Account

☐ Student loans

| Deb | Case 18-19848 D tor 1 Doris Y First Name Middle Name | oc 1 | Filed 07/16/18 Docur Qent rn | | n |
|------|---|-----------|--|---|-------------|
| Pa | rt 2: Your NONPRIORITY Uns | ecured | Claims — Continuati | on Page | |
| Afte | er listing any entries on this page, n | umber ti | hem beginning with 4.4 | , followed by 4.5, and so forth. | Total claim |
| 5.9 | Brother Loan & Finance Com | pany | | Last 4 digits of account number 2 1 0 2 | \$_1,377.00 |
| | 7621 63rd Street | | | When was the debt incurred? 10/02/2017 | |
| | Number Street Summit | IL. | 60501 | As of the date you file, the claim is: Check all that apply. | |
| | City Who incurred the debt? Check one. | State | ZIP Code | Contingent Unliquidated | |
| | Debtor 1 only | | | ☐ Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and anothe | r | | Student loans | |
| | ☐ Check if this claim is for a commu | | 6 | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Is the claim subject to offset? | miy acb | • | Debts to pension or profit-sharing plans, and other similar debts Other Specify Collections Account | |
| | M No | | | other Specify Collections Account | |
| | Yes | | | | |
| 6.0 | | ** * | | errore errore errore errore er er er errore er | |
| 0.0 | AAA Checkmate LLC | | | Last 4 digits of account number 2 1 0 2 | s 1,400.00 |
| | Nonpriority Creditor's Name 7647 W 63rd St | | | When was the debt incurred? 11/02/2016 | |
| | Number Street | | | | |
| | Summit Argo | IL | 60501 | As of the date you file, the claim is: Check all that apply. | |
| | • | State | ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | | Disputed | |
| | Debtor 1 only Debtor 2 only | | | T | |
| | Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | | | Student loansObligations arising out of a separation agreement or divorce that | |
| | Check if this claim is for a commu | nity debt | | you did not report as priority claims | |
| | Is the claim subject to offset? | · | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account | |
| | a No | | | Clife. Specify Concettons Account | |
| | Yes | | | | |
| 6.1 | | | | | 4 405 00 |
| | Crystal Rock Finance | **** | | Last 4 digits of account number 2 1 0 2 | s 1,425.00 |
| | Nonpriority Creditor's Name 7639 63rd Street Number Street | | | When was the debt incurred? 03/02/2016 | |
| | Summit | IL | 60501 | As of the date you file, the claim is: Check all that apply. | |
| | City | State | ZIP Code | ☐ Contingent | |
| 1 | Who incurred the debt? Check one | | | Unliquidated | |

6.

| Yes | | | |
|--|-------|----------|---|
| | | | many the second of the second |
| Crystal Rock Finance Nonpriority Creditor's Name | | | Last 4 digits of account number 2 1 0 2 When was the debt incurred? 03/02/2016 |
| 7639 63rd Street | | | When was the debt incurred? 03/02/2016 |
| Number Street Summit | IL | 60501 | As of the date you file, the claim is: Check all that apply. |
| Who incurred the debt? Check of Debtor 1 only | State | ZIP Code | Contingent Unliquidated Disputed |
| Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a Check if this claim is for a co | | | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims |
| Is the claim subject to offset? No Yes | • | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account |

Case 18-19848

Doc 1 Filed 07/16/18 Entered 07/16/18 15:47:27 Desc Main

Debtor 1

Doris

Docuraentrn Page 31 of 54 number (if known)

Part 3:

List Others to Be Notified About a Debt That You Already Listed

| -, won use the conscion augit | CV EIHTH. MII | BIARIV B VOILBA | ou for a debt you owe to someone else, list the original creditor in Parts 1 or 2, list the more than one creditor for any of the debts that you listed in Parts 1 or 2, list the cons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. |
|-------------------------------------|---|---------------------------------------|---|
| Elmhurst Emergency Me | edical Serv | vices | On which entry in Part 1 or Part 2 did you list the original creditor? |
| 200 Berteau Avenue Number Street | *************************************** | | Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim |
| Elmhurst City | IL State | 60126 ZIP Code | Last 4 digits of account number 2 4 1 5 |
| Convergent Outsourcing | | · | On which entry in Part 1 or Part 2 did you list the original creditor? |
| P.O. Box 9004 Number Street | | | Line 4.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Renton City | WA State | 98057 ZIP Code | Last 4 digits of account number 2 7 9 5 |
| ERC Name | | · · · · · · · · · · · · · · · · · · · | On which entry in Part 1 or Part 2 did you list the original creditor? |
| P.O. Box 57547 Number Street | | | Line 4.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Jacksonville City | FL State | 32241 ZIP Code | Last 4 digits of account number 4 7 2 8 |
| Name | ···· | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| City | State | ZIP Code | Last 4 digits of account number |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| City | State | ZIP Code | Last 4 digits of account number |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | |

| | 9 | 0 |
|------|-----------------|---------------------|
| page | L_{of} | $\underline{\iota}$ |

City

Name

Claims

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Last 4 digits of account number _____

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured

Case 18-19848 Doris

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Debtor 1

Docuration Page 32 of 54 number (# known)_____

Pard 4

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | | Total claim | |
|--------------|------------|--|------------|----------------|------|
| Total claims | 6a | . Domestic support obligations | 6a. | \$ | 0.00 |
| from Part 1 | 6b | . Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6с | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d | . Other. Add all other priority unsecured claims. Write that amount here. | 6d. | +\$ | 0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | Total claim | |
| Total claims | | | | | |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| from Part 2 | | Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6f. 6g. | \$ \$ | 0.00 |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority | | \$ \$ \$ | |
| from Part 2 | 6g. 6h. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other | 6g. | \$\$ \$\$ | 0.00 |

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| ebtor | Doris | Y. | Coburn | |
|-------------------|---------------------|-----------------------------|-----------|--|
| | First Name | Middle Name | Last Name | |
| ebtor 2 | | | | |
| spouse If filing) | First Name | Middle Name | Last Name | |
| nited States I | ankruptcy Court for | the: Northern District of I | linois | |

Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State

ZIP Code

State what the contract or lease is for

| 2.1 | ROCKWE | ll Partners | i | Residential Apartment Lease | |
|-----|-----------------|-------------|---|-----------------------------|--|
| | Name | 11-1-1-1-0 | | • | |
| | Number | Street | treet, #`102 | | |
| | | | IL | 00040 | |
| | Chicago City | <i></i> | | 60642 | PAW-1 |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | *************************************** | | *************************************** |
| | Number | Street | | | Printed Control of the Control of th |
| | City | | State | ZIP Code | |
| 2.3 | . , | | | 2 5040 | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | TOTAL MARKET OF A A A A A A A A A A A A A A A A A A |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | |

City

Case 18-19848 Doc 1 Filed 07/16/18 Entered 07/16/18 15:47:27 Desc Main Document Page 34 of 54

| Fill in this | s information to ic | lentify your case: | | |
|---|--|---|---|--|
| Debtor 1 | Doris | Υ. | Coburn | |
| Datasa | First Name | Middle Name | Last Name | - |
| Debtor 2 (Spouse, if fill | ing) First Name | Middle Name | Last Name | |
| United State | es Bankruptcy Court | for the: Northern District of I | llinois | |
| Case numb | ег | | | |
| (If known) | 100 | | | ☐ Check if this is a |
| | | | | amended filing |
| Official | Form 106 | <u>H</u> | | |
| schec | lule H: Y | our Codebto | rs | 12/15 |
| 1. Do you 1. Do you 2 No 2 Yes 2. Within Arizona | r the entries in the er (if known). Ans have any codebt the last 8 years, It, California, Idaho, Go to line 3. | e boxes on the left. Attack wer every question. ors? (If you are filing a join have you lived in a comming, Louisiana, Nevada, New M | ipprying correct information the Additional Page to this t case, do not list either spous | ory? (Community property states and territories include Vashington, and Wisconsin.) |
| u res | | tormer spouse, or legal eq | uivalent live with you at the tir | ne? |
| | | magnific ataka andandita | 12 0 | |
| was | Tes. III WINGH COM | munity state or territory did | you live? | |
| | Name of your spouse, f | ormer spouse, or legal equivalent | | |
| | | , , , | | |
| | Number Street | | | |
| | City | The same | | NAME OF THE PROPERTY OF THE PR |
| | - | State | ZIP Code | |
| shown Schedu Schedu | In line 2 again as le D (Official Forr le E/F, or Schedu | a codebtor only if that pe n 106D), Schedule E/F (O nle G to fill out Column 2. | rson is a guarantor or cosic | otor if your spouse is filing with you. List the person gner. Make sure you have listed the creditor on edule G (Official Form 106G). Use Schedule D, |
| Columi | 7 1: Your codebto | or | | Column 2: The creditor to whom you owe the debt |
| | | | | Check all schedules that apply: |
| .1] | | | | Chadula D. line |
| Name | | | | Schedule D, line |
| Number | Street | | 1994-1994-1994-1994-1994-1994-1994-1994 | Schedule G, line |
| City | | State | ZIP Code | |
| 2 | | Ottato | ZIF CODE | |
| Name | | | | Schedule D, line |
| 61 | | | | ☐ Schedule E/F, line |
| Number | Street | | | ☐ Schedule G, line |
| City | | State | ZIP Code | RPA Mahander mahana |
| 3] | | | | Charles C |
| Name | | · · · · · · · · · · · · · · · · · · · | | Schedule D, line |
| Number | Street | | | Schedule E/F, line |
| ~ | | · | | OUTCOME O, IIIC |
| City | | State | ZIP Code | |

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| Fill in this information to | identify your case: | | | | | | | | |
|---|---|---|---|---|--|--|--|--|--|
| Debtor 1 Doris | Υ. | Coburn | | | | | | | |
| First Name Debtor 2 | Middle Name | Last Name | | | | | | | |
| (Spouse, if filing) First Name United States Bankruptcy Co. | Middle Name urt for the: Northern District of Illinois | Last Name | | | | | | | |
| | artor die. Weldern platter of history | | Check if t | hie ie: | | | | | |
| (If known) | | | | ended filing | | | | | |
| | | | | plement showing postpetition chapter 13 e as of the following date: | | | | | |
| Official Form 106I | | | | D / YYYY | | | | | |
| Schedule I: | Your Income | | | 12/15 | | | | | |
| If you are separated and y | tion. If you are married and not fil our spouse is not filing with you, n. On the top of any additional pag | ing jointly, and you do not include info | r spouse is living with y mation about your spo | or 2), both are equally responsible for ou, include information about your spouse. use. If more space is needed, attach a nown). Answer every question. | | | | | |
| Fill in your employmen information. | t | Debtor 1 | | Debtor 2 or non-filing spouse | | | | | |
| If you have more than or | | rikaturit kituari kenkuturgi pela peringan kepalatan ti telepang ke | inn territoria esta esta esta esta esta esta esta est | idatan kanganan pada dan dalah Selimban yanti epikak ini disebahan kalahan kangan kangan kangan kangan kangan Kangan kangan pada dan dalah Selimban yanti epikak ini disebahan kangan kangan kangan kangan kangan kangan kan | | | | | |
| attach a separate page v information about additio employers. | | Employed Not employed | I | Employed Not employed | | | | | |
| Include part-time, seasor self-employed work. | nal, or | Ochodi | | | | | | | |
| Occupation may include or homemaker, if it applie | Student Occupation es. | Scheduler | | | | | | | |
| | Employer's name | ADVENTIST N | IIDWEST HEALTH | | | | | | |
| | Employer's address | 120 N. OAK ST | | | | | | | |
| | | Number Street | A-1-1-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- | Number Street | | | | | |
| | | | | | | | | | |
| | | Hinsdale City | IL 60521 State ZIP Code | City State ZIP Code | | | | | |
| | How long employed then | re? <u>2 Yrs</u> | | 2 Yrs | | | | | |
| Part 2: Give Details | : About Monthly Income | | | | | | | | |
| | Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space, include your non-filing | | | | | | | | |
| If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. | | | | | | | | | |
| | | | For Debtor 1 | For Debtor 2 or non-filing spouse | | | | | |
| List monthly gross way deductions). If not paid r | List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$_3 | | | \$ | | | | | |
| 3. Estimate and list monti | hly overtime pay. | ; | 3. + <u>\$</u> 0.00 | + \$ | | | | | |
| 4. Calculate gross income | e. Add line 2 + line 3. | 4 | \$ 3,150.00 | \$ | | | | | |

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| Debtor | 1 DORS Y. CODURN First Name Middle Name Last Name | | Case number (# known) | | | | | |
|----------------|---|--------------|--|---------------------------------------|------------------------------------|----------------------------------|---|---------|
| | | | Fo | or Debtor 1 | For Debtor 2 or non-filing spou | | | |
| Co | opy line 4 here | 🕏 4. | \$_ | 3,150.00 | \$ | | | |
| 5. Lis | st all payroll deductions: | | | | | | | |
| 58 | a. Tax, Medicare, and Social Security deductions | 5a. | \$ | 356.00 | \$ | | | |
| 51 | b. Mandatory contributions for retirement plans | 5b. | \$_ | 0.00 | \$ | | | • |
| 50 | c. Voluntary contributions for retirement plans | 5c. | \$_ | 0.00 | \$ | | | |
| 50 | d. Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | | | |
| 5€ | e. Insurance | 5e. | \$ | 0.00 | \$ | | | |
| 5 1 | f. Domestic support obligations | 5f. | \$_ | 211.00 | \$ | | | |
| 50 | g. Union dues | 5g. | \$_ | 0.00 | \$ | | | |
| - | h. Other deductions, Specify: After Tax Deductions | 5h. | +\$ | 105.00 | + \$ | | | |
| | dd the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g | | \$ | 672.00 | \$ | | | |
| 7. C : | alculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$_ | 2,478.00 | \$ | | | |
| 8. Lis | st all other income regularly received: | | | | | | | |
| 88 | a. Net income from rental property and from operating a business, profession, or farm | | | | | | | |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | | | |
| 81 | b. Interest and dividends | 8b. | \$ | 0.00 | \$ | | | |
| 80 | Family support payments that you, a non-filing spouse, or a depregularly receive | endent | | | | | | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | e 8c. | \$ | 0.00 | \$ | Wellinghouse | | |
| 80 | d. Unemployment compensation | 8d. | \$ | 0.00 | \$ | | | |
| 86 | e. Social Security | 8e. | \$ | 0.00 | \$ | | | |
| 81 | f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash ass that you receive, such as food stamps (benefits under the Supplemer Nutrition Assistance Program) or housing subsidies. Specify: n/a | | \$ | 0.00 | \$ | | | |
| _ | | | ٠ | | T | | | |
| | g. Pension or retirement income | 8g. | \$ | 0.00 | \$ | | | |
| 81 | h. Other monthly income. Specify: n/a | 8h. | +\$_ | 0.00 | +\$ | | | |
| 9. A | dd all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$_ | 0.00 | \$ | | grichten werden besteht der | <u></u> |
| | Iculate monthly income. Add line 7 + line 9. Id the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$ | 2,478.00 | + \$ | = | \$ 2,47 | 78.00 |
| Inc | ate all other regular contributions to the expenses that you list in S clude contributions from an unmarried partner, members of your househends or relatives. | | | ents, your roo | mmates, and other | | | |
| | o not include any amounts already included in lines 2-10 or amounts that necify: n/a | t are not av | railable | e to pay expen | ses listed in Schedul | e <i>J.</i> 11. + | \$ | 0.00 |
| | dd the amount in the last column of line 10 to the amount in line 11. | | | | • | | e 247 | 78.00 |
| | rite that amount on the Summary of Your Assets and Liabilities and Cert | | | ormation, if it a | pplies | 12. | Combined monthly inc | |
| Z | o you expect an increase or decrease within the year after you file to No. | this form? | | · · · · · · · · · · · · · · · · · · · | | W. With Kreek & Street of Server | | |
| ا | Yes. Explain: | | ······································ | ****** | | | | |

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| Fill | in this i | nformation to identify | your case: | | | | | | |
|----------------|----------------------------------|--|---|-----------------------|-----------------------------------|--|--------------------|--|---------------------------------|
| Det | otor 1 | Doris First Name | | Coburn | | Check if th | da in: | | |
| | otor 2 | | Middle Name | Last Name | | | | Ett | |
| | |) First Name | Middle Name | Last Name | | An ame | | | petition chapter 13 |
| | | | Northern District of Illinois | | | | | of the following | |
| | se number nown) | | | | | MM / DI |) | Y | |
| Off | icial l | Form 106J | | | | | | | |
| Sc | hec | lule J: Yo | ur Expenses | | | | | | 12/15 |
| Be as | s comple mation. I | ete and accurate as po | ossible. If two married peo ed, attach another sheet to | ple are fili | ing together, b | ooth are equally n f any additional p | espons pages, v | ible for supply write your nam | ing correct |
| 1. !s ! | his a joi | nt case? | THE RESIDENCE OF THE PROPERTY | | | | | WO. EX. S. 11 | |
| | | to line 2. es Debtor 2 live in a s | eparate household? | | | | | | |
| | | No | e Official Form 106J-2, <i>Expe</i> | nses for S | eparate House | hold of Debtor 2. | | | |
| 2. Do | you hav | e dependents? | □ No | | Dananda sika u | | | | |
| | not list D btor 2. | ebtor 1 and | Yes. Fill out this inform each dependent | | Dependent's n Debtor 1 or De | | a, | Dependent's age | Does dependent live with you? |
| | not state nes. | the dependents' | | | Girl | | | 14 | ☐ No ☑ Yes |
| | | | | | Son | | | 21 | ☐ No |
| | | | | | | | | | ☑ Yes ☑ No |
| | | | | | | | - | | O Yes |
| | | | | | | | | | □ No |
| | | | | | | | | | ☐ Yes |
| | | | | | | | - | —————————————————————————————————————— | □ No □ Yes |
| ехр | enses o | enses include f people other than d your dependents? | ☑ No □ Yes | | | | | | |
| Part 2 | à Es | timate Your Ongoir | ng Monthly Expenses | | | | | | |
| expen | ate your ses as c able dat | f a date after the bank | bankruptcy filing date unle cruptcy is filed. If this is a s | ss you ar suppleme | re using this fo ntal Schedule | orm as a supplem J, check the box | ent in a | a Chapter 13 ca top of the form | se to report and fill in the |
| | | | cash government assistar it on <i>Schedule I: Your Inco</i> | | | | | Your expen | FAC |
| 4. Th | e rental | or home ownership ex | penses for your residence | | | = | | t out experi | |
| | - | the ground or lot. ded in line 4: | | | | | 4. | Ψ | |
| 4a. | | estate taxes | | | | | 4a. | \$ | 0.00 |
| 4b. | Prope | ty, homeowner's, or re | nter's insurance | | | | 4b. | \$ | 0.00 |
| 4c. | Home | maintenance, repair, a | nd upkeep expenses | | | | 4c. | \$ | |
| 4d. | Home | owner's association or o | condominium dues | | | | 4d. | \$ | 0.00 |

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Debtor 1 Doris Y. Coburn Case number (if known) Case number (if known)

| | | | | Your ex | penses |
|--|-----|--|------|----------|--|
| | 5. | Additional mortgage payments for your residence, such as home equity loans | 5. | \$ | 0.00 |
| Section Sect | | | 0. | | |
| 8. Water, sewer, garbage collection 6. \$ 35,00 6. Telephone, cell phone, Internet, satellite, and cable services 6. \$ 200,00 7. Food and housekeeping supplies 7. \$ 0.00 8. Childcare and children's education costs 8. \$ 0.00 9. Childcare and children's education costs 8. \$ 0.00 10. Personal care products and services 10. \$ 30,00 10. Medical and dental expenses 11. \$ 0.00 11. Medical and dental expenses 12. \$ 120,00 12. Transportation, Include gas, maintenance, bus or train fere. 12. \$ 120,00 13. Chartainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 14. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance. 15. Insurance. 15. \$ 0.00 16. Insurance. 15. \$ 0.00 17. Chier, Issurance 15. \$ 0.00 18. Vehicle insurance 15. \$ 0.00 19. Vehicle insurance 15. \$ 0.00 19. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15. Vehicle insurance. 15. \$ 0.00 19. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15. Vehicle insurance. 15. \$ 0.00 19. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15. Vehicle insurance. 15. \$ 0.00 19. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15. 0.00 19. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15. 0.00 19. Cother, Specify, In/A | Ų. | | 0- | e | 120.00 |
| Sec. Telephone, cell phone, Internet, satellite, and cable services 6c. Cher. Specify: In/a | | · · · · · · · · · · · · · · · · · · · | | \$ | |
| Food and housekeeping supplies | | | | ø | |
| 7. Food and housekoeping supplies 7. \$ 0.00 8. Childcare and children's education costs 8. \$ 0.00 9. Clothing, Isundry, and dry cleaning 9. \$ 60.00 10. Personal care products and services 10. \$ 30.00 11. Medical and dental expenses 11. \$ 0.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$ 120.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 14. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance. 15s. Life insurance 15s. \$ 0.00 15e. Lelide insurance ededucted from your pay or included in lines 4 or 20. 15c. Vehicle insurance 15s. \$ 0.00 15e. Volther insurance. Specity. In/A 16. \$ 0.00 15e. Vehicle insurance 15s. \$ 0.00 15e. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Vehicle insurance. 15c. \$ 0.00 15e. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Other. Specity. In/A 17c. \$ 0.00 17e. Car payments for Vehicle 1 17c. \$ 0.00 0.00 17e. Car payments for Vehicle 2 17c. Other. Specity. In/A 17c. \$ 0.00 <t< td=""><td></td><td></td><td></td><td></td><td></td></t<> | | | | | |
| Childicare and children's education costs 8 5 0.00 | 7. | | | J | |
| 10 Personal care products and services | | | | \$ | |
| 10 Personal care products and services 10 \$ 30,00 11 Medical and dental expenses 11 \$ 0,00 12 Transportation, include gas, maintenance, bus or train fare. 12 \$ 120,00 13 Entertainment, clubs, recreation, newspapers, magazines, and books 13 \$ 0,00 14 Charitable contributions and religious donations 14 \$ 0,00 15 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15 Life insurance 15s \$ 0,00 15 Vehicle insurance 15s \$ 0,00 15 Vehicle insurance 15s \$ 0,00 15 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 16 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 17 Installment or lease payments: 17 18 5 5 17 Installment or lease payments: 17 18 5 5 17 Other, Specify: n/A 17 5 5 5 17 Other, Specify: n/A 17 5 5 5 17 Other, Specify: n/A 17 5 0,00 18 Other payments for Vehicle 2 17 5 0,00 19 Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106I). 18 0,00 19 Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106I). 18 0,00 18 Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106I). 18 0,00 18 Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106I). | | | | \$ | |
| 11 Medical and dental expenses 11 s 0 0.00 12 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12 s 120.00 13 Entertainment, clubs, recreation, newspapers, magazines, and books 13 s 0.00 14 Charitable contributions and religious donations 14 s 0.00 15 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. Life insurance 15b. S 0.00 15b. Health insurance 15b. Health insurance 15c. Vehicle Insurance 15c. Vehicl | | | | \$ | |
| 12 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 2 5 120.00 13 Entertainment, clubs, recreation, newspapors, magazines, and books 13 5 0.00 14 Charitable contributions and religious donations 14 5 0.00 15 Insurance 15a 5 0.00 16 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20 17 Installment or lease payments 17 5 0.00 17 Installment or lease payments 17 5 0.00 17 Installment or lease payments 17 5 0.00 17 Installment or lease payments 17 0.00 17 Other. Specify: n/a 17 0.00 17 Other. Specify: n/a 17 0.00 18 Your payments of Vehicle 1 0.00 19 Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule Nour Income (Official Form 106). 18 0.00 18 Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule Nour Income (Official Form 106). 0.00 16 Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule Nour Income (Official Form 106). 0.00 18 Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule Nour Income (Official Form 106). 0.00 16 Other payments of alimony, maintenance, and support that you did not report | | | 10. | \$ | |
| Do not include car payments 12 \$ 120.00 | | | 11, | \$ | 0.00 |
| 13 | 12. | | 40 | \$ | 120.00 |
| 1.4. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15. Life insurance 15a. Life insurance 15b. Go. 0.00 15b. Health insurance 15b. Go. 0.00 15c. Vehicle insurance 15c. So. 0.00 15c. Vehicle insurance. Specify: n/a 15c. So. 0.00 15c. Vehicle insurance. Specify: n/a 15d. So. 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: n/a 16. So. 0.00 16c. So. 0.00 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. So. 0.00 17b. So. 0.00 17b. Car payments for Vehicle 2 17b. So. 0.00 17c. Other. Specify: n/a 17c. 0.00 17c. Other. Specify: n/a 17c. 0.00 17c. Other. Specify: n/a 17c. Other. Specify: n/a 17c. So. 0.00 17c. Other. Specify: n/a 17c. So. 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106l). 18. So. 0.00 19. Other payments you make to support others who do not live with you. Specify: n/a 19. 0.00 20c. Other real property expenses not included in lines 4 or 5 of this form or on Schedule | 13 | | | | 0.00 |
| 15. Insurance | | | | \$ | |
| Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance | | | 14. | \$ | 0.00 |
| 15b. Health insurance 15b. S 0.00 15c. Vehicle insurance 15c. S 120.00 15d. Other insurance. Specify: n/a 15d. S 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 16e. S 0.00 17e. Installment or lease payments: 17e. Car payments for Vehicle 1 17e. S 545.00 17b. Car payments for Vehicle 2 17b. S 0.00 17c. Other. Specify: n/a 17c. S 0.00 17d. Other. Specify: n/a 17d. S 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. S 0.00 18. Other payments you make to support others who do not live with you. 18. S 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. S 0.00 20a. Mortgages on other property 20a. S 0.00 20b. Real estate taxes 20b. S 0.00 20c. Property, homeowner's, or renter's insurance 20c. S 0.00 20d. Maintenance, repair, and upkeep expenses 20d. S 0.00 | 15. | | | | |
| 15b. Health insurance 15b. S 0.00 15c. Vehicle insurance 15c. S 120.00 15d. Other insurance. Specify: n/a 15d. S 120.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 16. S 0.00 17. Installment or lease payments: 17a. S 545.00 17b. Car payments for Vehicle 1 17a. S 545.00 17b. Car payments for Vehicle 2 17b. S 0.00 17c. Other. Specify: n/a 17c. S 0.00 17d. Other. Specify: n/a 17d. S 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. S 0.00 19. Other payments you make to support others who do not live with you. 18. S 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. S 0.00 20a. Mortgages on other property 20a. S 0.00 20b. Real estate taxes 20b. S 0.00 20c. Property, homeowner's, or renter's insurance 20c. S 0.00 20d. Maintenance, repair, and upkeep expenses 20d. S 0.00 <td></td> <td>15a. Life insurance</td> <td>15a.</td> <td>\$</td> <td>0.00</td> | | 15a. Life insurance | 15a. | \$ | 0.00 |
| 15c. Vehicle Insurance 15c. Vehicle Insurance \$ 120.00 15d. Other insurance. Specify: n/a 15d. Vehicle Insurance. Specify: n/a \$ 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$ 0.00 Specify: n/a 16. \$ 0.00 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 545.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: n/a 17c. \$ 0.00 17c. Other. Specify: n/a 17d. \$ 0.00 17d. \$ 0.00 17d. Other. Specify: n/a 17d. \$ 0.00 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.00 19. Other payments you make to support others who do not live with you. 5 0.00 Specify: n/a 19. \$ 0.00 20. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 | | 15b. Health insurance | | \$ | 0.00 |
| 15d. Other insurance. Specify: n/a 15d. \$ 0.00 | | 15c. Vehicle insurance | | \$ | 120.00 |
| Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: n/a 16. \$ 0.00 | | 15d. Other insurance. Specify: n/a | | \$ | |
| Specify: n/a 16. \$ 0.00 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 545.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: n/a 17c. \$ 0.00 17d. Other. Specify: n/a 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). 18. \$ 0.00 19. Other payments you make to support others who do not live with you. 5 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 | | | | Ψ | With a second se |
| 17a. Car payments for Vehicle 1 17a. \$ 545.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: n/a 17c. \$ 0.00 17d. Other. Specify: n/a 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.00 19. Other payments you make to support others who do not live with you. Specify: n/a 19. \$ 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 | 16. | 0 1 1/0 | 16. | \$ | 0.00 |
| 17b. Car payments for Vehicle 2 17c. Other. Specify: n/a 17d. Other. Specify: n/a 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Specify: n/a 19. Other payments you make to support others who do not live with you. Specify: n/a 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses | 17. | Installment or lease payments: | | | |
| 17c. Other. Specify: n/a 17d. Other. Specify: n/a 17d. Other. Specify: n/a 17d. Other. Specify: n/a 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.00 19. Other payments you make to support others who do not live with you. Specify: n/a 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 | | 17a. Car payments for Vehicle 1 | 17a. | \$ | 545.00 |
| 17d. Other. Specify: n/a 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.00 19. Other payments you make to support others who do not live with you. Specify: n/a 19. \$ 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 | | 17b. Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: n/a 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses | | 17c. Other. Specify: n/a | 17c. | \$ | 0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.00 19. Other payments you make to support others who do not live with you. Specify: n/a 19. \$ 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 | | 17d. Other. Specify: n/a | 17d. | \$ | 0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.00 19. Other payments you make to support others who do not live with you. Specify: n/a 19. \$ 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 | 18 | Your navments of alimony maintenance, and support that you did not report on deducted from | | | |
| 19. Other payments you make to support others who do not live with you. Specify: n/a 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses | | your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ | 0.00 |
| Specify: n/a Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses | 19 | Other payments you make to support others who do not live with you | | · | |
| 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Soft this form or on Schedule I: Your Income. 20a. \$ 0.00 0.00 0.00 20b. \$ 0.00 20c. \$ 0.00 20d. \$ 0.00 | | , | 19, | \$ | 0.00 |
| 20a. Mortgages on other property 20a. \$ | 20. | | | · | |
| 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 | | | | \$ | 0.00 |
| 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 | | 20b. Real estate taxes | 20b. | \$ | 0.00 |
| 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 | | 20c. Property, homeowner's, or renter's insurance | | | |
| | | | | | |
| | | , , , , | 20e. | | |

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| Debtor 1 | Doris First Name | Middle Name | Υ. | Coburn | Case number (# kmo | 14n) | | |
|-----------------|--------------------------|-----------------|---------------------|-----------------------------|--------------------|------|-------------|----------|
| 21. Ot l | ner. Specify: <u>n/a</u> | Middle Name | Last Name | | | 21. | + \$ | 0.00 |
| 22. Cal | culate your mont | thly expenses | | | | | | |
| 22a | . Add lines 4 throu | ıgh 21. | | | | 22a. | \$ | 2,405.00 |
| 22b | . Copy line 22 (mo | onthly expense | s for Debtor 2), if | any, from Official Form 106 | SJ-2 | 22b. | \$ | 0.00 |
| 22c | . Add line 22a and | 22b. The resu | lt is your monthly | expenses. | | 22c. | \$ | 2,405.00 |
| 23. Caic | ulate your month | lly net income | | | | | | |
| 23a. | Copy line 12 (yo | ur combined m | onthly income) fo | rom Schedule I. | | 23a. | \$ | 2,478.00 |
| 23b. | Copy your month | hly expenses fr | om line 22c abov | re. | | 23b. | - \$ | 2,405.00 |
| 23c. | Subtract your mo | | • | thly income. | | 23c. | \$ | 73.00 |

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

₩ No.

Yes.

Explain here:

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| | | | | 3 | | |
|---------------------|---------------------------|-----------------------------|--------------------------|--|---|-------------------------|
| ill in this in | formation to ider | itify your case: | | | | |
| ebtor 1 | Doris | Υ. | Coburn | associated and colonidar. | | |
| btor 2 | First Name | Middle Name | Last Name | | | |
| ouse, if filing | First Name | Middle Name | Last Name | *************************************** | | |
| ted States | Bankruptcy Court for | the: Northern District of I | llinois | | | |
| se number known) | | | | | | |
| | | | | | | Check if this is |
| | | | | | | amended filing |
| Officia | Form 106 | :Dec | | | | |
| ***************** | | | | | _ | |
| Deci | aration | About an | Individual | Debtor's | Schedule | S 12/15 |
| two mar | ried people are fil | ing together, both are e | oually responsible for | supplying correct inf | formation | |
| | | | | | | |
| ou must | ine ans form wife | never you file bankrupt | cy scriedules or amend | ea scheaules. Makin | ig a false statement, c | concealing property, or |
| obtaining i | money or propert | y by fraud in connection | n with a bankruptcy cas | se can result in fines | up to \$250,000, or im | prisonment for up to 20 |
| ears, or b | oth. 18 U.S.C. §§ | 152, 1341, 1519, and 35 | 71. | | | |
| | | | | | | |
| | l | | | | | |
| | Sign Below | | | | | |
| | | | | | | |
| District | | | ~~ | **** | _ | |
| | i pay or agree to | pay someone who is NO | Of an attorney to help y | ou fill out bankrupto | cy forms? | |
| □ No ☑ Yes | . Name of person T | ania Stoystell | | | | |
| eman res | . Name or person | and Otoxoton | | | Petition Preparer's Notice. | Declaration, and |
| | | | | Signature (Official F | onn 119). | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Under r | penalty of periury. | , I declare that I have re | ad the summary and so | hadules filed with th | he darlaration and | |
| that the | y are true and co | rrect. | | The second of th | no accuration and | |
| A). | 2. | | | | | |
| |) | | _ | | | |
| ×_F | | | * | | | |
| Signatu | re of Debtor 1 | | Signature of Deb | tor 2 | THE AND THE POST OF THE | |
| D. 6 | 716 2019 | | _ | | | |
| Date | 7 16 2013 W/ DD / YYYY | MA. | Date | YYYY | | |
| | | | | | | |

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| ebtor 1 | Doris First Name | Y. Middle Name | Coburn Last Name | WHATE-Water | | |
|---|--|--|--|--|--------------------------|--|
| ebtor 2 | iQ) First Name | | | | | |
| | | Middle Name for the: Northern District o | Last Name | | | |
| se numbe | | rocking Platfict | A RIHIOIS | | | |
| (nown) | | | | | | heck if this is a |
| | | | | | aı | mended filing |
| ficial | Form 107 | · • | | | | |
| | | | | | | |
| | | | Carlotte and March Control of the Co | /iduals Filing for B | | 04/ |
| maxvn, | ii more space i | is needed, attach a sepa | rried people are filin rate sheet to this fo | g together, both are equally resp rm. On the top of any additional p | onsible for supplying co | orrect and case |
| ber (if kı | nown). Answer | every question. | | | agos, mito your name i | and case |
| art 1: | Give Details A | lbout Your Marital St | atus and Where Y | ou Lived Before | | |
| | | | | | | |
| _ | your current ma | erital status? | | | | |
| Marr Marr | | | | | | |
| ☐ Not r | married | | | | | |
| | | | | | | |
| During ti | he last 3 years. | have you lived annuhore | s other than where w | ou the nous | | |
| During ti | he last 3 years, l | have you lived anywhere | other than where y | ou live now? | | |
| M No | | have you lived anywhere | | | | |
| Mo No □ Yes. | | | years. Do not include Dates Debtor 1 | | ε | Dates Debtor 2 |
| No Yes. | List all of the pla | | years. Do not include | e where you live now. | | Pates Debtor 2 ved there |
| Mo No □ Yes. | List all of the pla | | years. Do not include Dates Debtor 1 | e where you live now. | li | ved there |
| No Yes. | List all of the pla | | years. Do not include Dates Debtor 1 | Debtor 2: Same as Debtor 1 | li | Same as Debtor 1 |
| No Yes. | List all of the pla | | years. Do not include Dates Debtor 1 lived there | e where you live now. Debtor 2: | li | |
| No Yes. | List all of the pla | | years. Do not include Dates Debtor 1 lived there | Debtor 2: Same as Debtor 1 | li | Same as Debtor |
| No Yes. | List all of the pla | | years. Do not include Dates Debtor 1 lived there | Debtor 2: Same as Debtor 1 Number Street | i | Same as Debtor |
| No Yes. Del | List all of the pla | ces you lived in the last 3 | years. Do not include Dates Debtor 1 lived there | Debtor 2: Same as Debtor 1 Number Street City State | e ZIP Code | Same as Debtor From To |
| No No Del | List all of the pla | ces you lived in the last 3 | years. Do not include Dates Debtor 1 lived there | Debtor 2: Same as Debtor 1 Number Street | i | Same as Debtor From To |
| No Ves. Del | List all of the pla | ces you lived in the last 3 | years. Do not include Dates Debtor 1 lived there From To From To | Debtor 2: Same as Debtor 1 Number Street City State | e ZIP Code | Same as Debtor From To |
| No Yes. Del | List all of the pla | ces you lived in the last 3 | years. Do not include Dates Debtor 1 lived there From To | Debtor 2: Same as Debtor 1 Number Street City Stat | e ZIP Code | Same as Debtor From To Same as Debtor 1 |
| No Yes. Del | List all of the pla | ces you lived in the last 3 | years. Do not include Dates Debtor 1 lived there From To From To | Debtor 2: Same as Debtor 1 Number Street City State | e ZIP Code | Same as Debtor 1 From Same as Debtor 1 From |
| No Yes. Del | List all of the pla btor 1: mber Street | ces you lived in the last 3 | years. Do not include Dates Debtor 1 lived there From To From To | Debtor 2: Same as Debtor 1 Number Street City State | e ZIP Code | Same as Debtor 1 From Same as Debtor 1 From |
| No No Pel | List all of the pla btor 1: mber Street | ces you lived in the last 3 State ZIP Code | years. Do not include Dates Debtor 1 lived there From To From To | Debtor 2: Same as Debtor 1 Number Street City State Number Street City State | e ZIP Code | Same as Debtor 1 From Same as Debtor 1 From To |
| Nu Yes. Del Nu City Within the states and | List all of the pla btor 1: mber Street mber Street | State ZIP Code | years. Do not include Dates Debtor 1 lived there From To From To Douise or legal equiv | Debtor 2: Same as Debtor 1 Number Street City State Number Street City State | e ZIP Code | Same as Debtor 1 From To Same as Debtor 1 From To |
| Nu No Del | List all of the pla btor 1: mber Street mber Street e last 8 years, d d territories include | State ZIP Code State ZIP Code State Arizona, California, Ida | years. Do not include Dates Debtor 1 lived there From To From To pouse or legal equively the continuous and the continuous | Debtor 2: Same as Debtor 1 Number Street City State Number Street City State City St | e ZIP Code | Same as Debtor To Same as Debtor From Tro Tro Tro |
| Nu Nu City Within th states and | List all of the pla btor 1: mber Street mber Street e last 8 years, d d territories include | State ZIP Code | years. Do not include Dates Debtor 1 lived there From To From To pouse or legal equively the continuous and the continuous | Debtor 2: Same as Debtor 1 Number Street City State Number Street City State City St | e ZIP Code | Same as Debtor To Same as Debtor From To To |

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| Debto | | Coburn st Name | Case nu | umber (d known) | *************************************** |
|----------------------|--|--|---|--|--|
| l | Did you have any income from employme Fill in the total amount of income you receive If you are filing a joint case and you have ince No Yes. Fill in the details. | ed from all jobs and all bus | sinesses, including nart-ti | me activitice | endar years? |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | From January 1 of current year until the date you filed for bankruptcy: | ✓ Wages, commissions, bonuses, tips✓ Operating a business | \$20,961.01 | ☐ Wages, commissions, bonuses, tips ☐ Operating a business | \$ |
| | For last calendar year: (January 1 to December 31, 2017 | Wages, commissions, bonuses, tips Operating a business | \$15,907.00 | Wages, commissions, bonuses, tips Operating a business | \$ |
| | For the calendar year before that: (January 1 to December 31, 2016 | Wages, commissions, bonuses, tips Operating a business | \$15,081.00 | Wages, commissions, bonuses, tips Operating a business | \$ |
| ir ui gi Li | id you receive any other income during to include income regardless of whether that income memployment, and other public benefit paymembling and lottery winnings. If you are filing st each source and the gross income from a No | come is taxable. Examples nents; pensions; rental inco g a joint case and you have | of other income are alimome; interest; dividends; income that you receive | money collected from laws d together, list it only once | uite: roughtion; and |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| | From January 1 of current year until the date you filed for bankruptcy: | | \$ \$ | | \$ \$ |
| | | | <u> </u> | | \$ |
| | For last calendar year: (January 1 to December 31, 2017 YYYY) | \$ \$ | 3 | | \$ |
| | For the calendar year before that: (January 1 to December 31, 2016 YYYY | | | | \$ |

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| Debtor 1 | Doris First Name Midd | Y. lie Name | | Coburn | Cas | number (if known) | |
|-----------------|-----------------------|---|---|---|--|--|--------------------------------|
| | thetredite Wido | ie Name | Last Name | | | | |
| Part 3: | List Certain Pa | vments Yo | u Made Bef | ara Von Eila | d for Bankruptcy | | |
| | | | | ore rouring | e for bankruptcy | | |
| 6. Are eit | ther Debtor 1's or D | Debtor 2's de | ebts primarily | Consumer del | hte? | | |
| | | | | | | | |
| WALL 110 | mouned by an m | uiviuuai piini | arily for a perso | onai, family, or | household purpose." | are defined in 11 U.S.C. § 10 | 1(8) as |
| | During the 90 day | s before you | filed for bankrı | uptcy, did you p | pay any creditor a total c | of \$6,425* or more? | |
| | No. Go to line | 7. | | | | | |
| | iotai aint | ин уон рак | mai creditor, L | 20 not include i | f \$6,425* or more in one payments for domestic s ments to an attorney for | or more payments and the support obligations, such as | |
| | * Subject to adjust | tment on 4/0 | 1/19 and every | 3 years after t | hat for cases filed on or | this bankruptcy case. after the date of adjustment. | |
| 🗹 Ye | s. Debtor 1 or Debt | | | | | , | |
| | During the 90 day | s before you | filed for bankru | ptcy, did you p | ay any creditor a total o | f \$600 or more? | |
| | No. Go to line | | | | | | |
| | Yes, List below | v each credit | or to whom you | naid a total of | CEOO or more and the t | otal amount you paid that | |
| | GEGROL I | JO HOLINGIUG | e payments for | domestic suni | port obligations, such as ey for this bankruptcy ca | child cusport and | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| | Creditor's Name | | | *** | \$ | \$ | ☐ Mortgage |
| | Gradio d Hamo | | | | | | Car |
| | Number Street | | | | | | Credit card |
| | ···· | | | | | | Loan repayment |
| | | | | | | | Suppliers or vendors |
| | City | State | ZIP Code | | | | Other |
| | | | | | | | |
| | Creditor's Name | | *************************************** | | \$ | \$ | ☐ Mortgage |
| | oroundr's Harne | | | | | | Car |
| | Number Street | | | *************************************** | | | Credit card |
| | | | | | | | Loan repayment |
| | | *************************************** | | | | | Suppliers or vendors |
| | City | State | ZIP Code | | | | Other |
| | | | | | | | |
| | 4-14-4 | | | | \$ | \$ | n. |
| | Creditor's Name | | | | | | ☐ Mortgage ☐ Car |
| | Number Street | | | | | | Car Credit card |
| | wenten Graph | | | | | | ☐ Credit card ☐ Loan repayment |
| | | | | | | | Suppliers or vendors |
| | City | Chale | 76.0 | | | | Other |
| | City | State | ZIP Code | | | | Uner |

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| Debtor | 1 Doris First Name | Middle Name | Y. | st Name | Coburn | mad . | Case number (if known |) |
|----------------|---|---|---|--|--|--|---|---|
| or aç sı | nsiders include you orporations of whice gent, including one uch as child support No. | r relatives; any th you are an o for a business rt and alimony | general officer, dire s you ope | partners; re ector, perso | elatives of any on in control, o | general partners; r owner of 20% or | partnerships of which more of their voting | who was an insider? ch you are a general partner; g securities; and any managing r domestic support obligations, |
| | , , | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | ····· | *************************************** | *************************************** | \$ | \$ | |
| | Number Street | 7,7,11 | | ***** | | | | |
| | · | | | *************************************** | *************************************** | | | |
| | City | (| State ZIP | Code | | • | | |
| | Insider's Name | | *************************************** | | and the second s | \$ | \$ | |
| | Number Street | | | *************************************** | ************************************** | | | |
| | City | S | itate ZIP | Code | | | | |
| an Inc | thin 1 year before insider? clude payments on No Yes. List all paym | debts guarant | eed or co | signed by a | | ayments or trans | fer any property or | n account of a debt that benefited |
| | | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | Insider's Name | | *************************************** | ************************************** | | \$ | \$ | |
| | Number Street | | | | ************************************** | | | |
| | City | SI | ate ZIP (| Code | | | | |
| | Insider's Name | | *************************************** | AARTON PROPERTY CONTRACTOR OF THE PROPERTY CONTR | PP-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- | \$ | \$ | |
| | Number Street | ************************************** | | | Mr. Westernamen and a second an | | | |
| | | • | | *************************************** | *************************************** | | | |

City

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| otor 1 | Doris | | Υ. | Coburn | Case number ##ww | ent | |
|-----------------|---|---------------------|---------------|---|---|--|--|
| | First Name | Middle Name | La | st Name | | 7. 1 January 11 Januar | ************************************** |
| | | | | | | | |
| nt 4 | | | | sessions, and Foreclos | | | |
| Withi | in 1 year befor | e you filed | for bankrup | otcy, were you a party in an | y lawsuit, court action, or adm | inistrative pro | ceeding? |
| List a and c | ontract dispute | , including p s. | ersonal injui | ry cases, small claims action | s, divorces, collection suits, pate | rnity actions, su | ipport or custody modificat |
| V N | | , | | | | | |
| | o es. Fill in the de | etaile | | | | | |
| | | otano. | | Nature of the case | Court | | |
| | | | | warare or the case | Court or agency | | Status of the case |
| (| Case title | | | | | | Pending |
| | | | | who | Court Name | | On appeal |
| _ | | | | • | Number Street | | Concluded Concluded |
| c | Case number | | | | 7,41,150 | | Concluded |
| | | | | - | City Sta | te ZIP Code | |
| | | | | | | | |
| C | Case title | | | | Websel | | —— • Pending |
| | *************************************** | ~-~~ | | • | Court Name | | On appeal |
| | | | | | Number Street | | Concluded Concluded |
| 0 | ase number | | | | Hamber Street | | Concluded |
| ~ | | | | • | City Sta | te ZIP Code | |
| | s. Fill in the info | ornightor be | | Describe the prop | perfy | Date | Matur - Eth |
| | | | | | ······································ | Date | Value of the property |
| | *************************************** | | | | | | r. |
| | Creditor's Name | | | | | | \$ |
| | Number Stree | of | | ************************************** | | | |
| | | | | Explain what hap | | | |
| | | | | | s repossessed | | |
| | | | | Property wa | | | |
| | City | | State ZIP Co | | s gamisned. s attached, seized, or levied. | | |
| | · | | | | | _ | |
| | | | | Describe the prop | enty | Date | Value of the property |
| | | | | | | | |
| | Creditor's Name | T47474111414 | | | | | <u> </u> |
| | ordano, o rigino | | | | | | |
| | Number Street | ŧ | | The filter of the relative contract and apply apply | | | |
| | | | | Explain what happ | pened | | |
| | | | | Property was | s repossessed. | | |
| | | | | Property was | | | |
| | City | | State ZIP Co | | s garnished. | | |
| | | | | | haivel to havies herbatas | | |

Doris

Y.

Document Page 46 of 54 Debtor 1 Coburn Case number (if known)_ 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? 2 No Yes. Fill in the details. Describe the action the creditor took Date action Amount was taken Creditor's Name Number Street State ZIP Code Last 4 digits of account number: XXXX-____ 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? M No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? MO No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift Number Street City State ZiP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift Number Street State ZIP Code Person's relationship to you __

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Doc 1

Filed 07/16/18

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Case 18-19848 Doc 1 Filed 07/16/18 Entered 07/16/18 15:47:27 Desc Main Document Page 47 of 54 Doris Debtor 1 Coburn Case number (if known)_ 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? $\hfill \square$ Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities Describe what you contributed Date you Value that total more than \$600 contributed Charity's Name Number Street City ZIP Code State Part 6: **List Certain Losses** 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? M No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7 **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment 001 Debtorcc Inc. transfer was Person Who Was Paid made Credit Counseling Certificate 372 Summit Number Street 07/09/2018 14.95

Jersey City

www.001debtorcc.com
Email or website address

Person Who Made the Payment, if Not You

NJ

07306

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| | Doris | | Y. | Coburn | Case number (if known) | | |
|--|--|---|--|---|---------------------------------|--|--------------------------|
| | First Name | Middle Name | Las | st Name | Case number (if known) | ARTON (M. 1971) | |
| | | | | Description and value of any prop | erty transferred | Date payment or | Amount of |
| | Tania Stoxst | fell | | | | transfer was made | |
| | Person Who Was P | aid | | Bankruptcy Petition Prepa | rer | | |
| | 1426 Dougla | as Lane | | • | | 07/09/2018 | \$200.0 |
| | Number Street | | | | | | |
| | | | ***** | - | | Annual Control of the | \$ |
| | Crete | IL_ | 60417 | | | | |
| | City | State | ZIP Code | | | | |
| | tstoxstell@ya | | | | | | |
| | Email or website add | iress | | | | | |
| | Person Who Made th | ne Payment, if I | Vot You | | | | |
| 1 | | | ansier inat y | ou listed on line 16. | | | |
| | | | | Description and value of any prope | rty transferred | Date payment or transfer was made | Amount of paymen |
| | Person Who Was Pa | aid | | | | mage | |
| | Number Street | | | | | | \$ |
| | | | | | | | |
| | **** | | | | | | |
| | | | | | | | \$ |
| 8. With | City | State e vou filed | ZIP Code for bankrup | tcv did vou sell trade or otherw | ino transfer any managina da a | | \$ |
| Inclu Do n | in 2 years before sferred in the or- de both outright to tinclude gifts ar | re you filed dinary cou transfers an nd transfers | for bankrup rse of your t d transfers m | tcy, did you sell, trade, or otherw ousiness or financial affairs? nade as security (such as the granting re already listed on this statement. | | | |
| Inclu Do n | in 2 years before sferred in the order de both outright to ot include gifts are | re you filed dinary cou transfers an nd transfers | for bankrup rse of your t d transfers m | Dusiness or financial affairs? Nade as security (such as the grantic | | ortgage on your prop | |
| Inclu Do n | in 2 years before sferred in the order de both outright to ot include gifts are | e you filed dinary cou transfers an nd transfers ails. | for bankrup rse of your t d transfers m | pusiness of financial affairs? nade as security (such as the granting already listed on this statement. Description and value of property | ng of a security interest or mo | ortgage on your prop | erty). Date transfer |
| Inclu Do n M N Y | in 2 years before sferred in the or de both outright to ot include gifts ar to es. Fill in the det | e you filed dinary cou transfers an nd transfers ails. | for bankrup rse of your t d transfers m | pusiness of financial affairs? nade as security (such as the granting already listed on this statement. Description and value of property | ng of a security interest or mo | ortgage on your prop | erty). Date transfer |
| Inclu Do n 10 10 10 10 10 10 10 10 10 10 10 10 10 | in 2 years before sferred in the ordered to the outright to the outright of include gifts are to eas. Fill in the determinant of the outright | e you filed dinary cou transfers an nd transfers ails. | for bankrup rse of your t d transfers m | pusiness of financial affairs? nade as security (such as the granting already listed on this statement. Description and value of property | ng of a security interest or mo | ortgage on your prop | erty). Date transfer |
| Inclu Do n M N Y | in 2 years before sterred in the ordered to the outright to tinclude gifts and to see the control of the contro | e you filed dinary cou transfers an nd transfers ails. | for bankrup rse of your t d transfers m that you hav | pusiness of financial affairs? nade as security (such as the granting already listed on this statement. Description and value of property | ng of a security interest or mo | ortgage on your prop | perty). Date transfer |
| Inclu Do n M N Y | in 2 years before sterred in the ordered in the ordered in the ordered include gifts and of the control of the | e you filed dinary cou iransfers and transfers ails. Transfer State | for bankrup rse of your t d transfers m that you hav | pusiness of financial affairs? nade as security (such as the granting already listed on this statement. Description and value of property | ng of a security interest or mo | ortgage on your prop | erty). Date transfer |
| Inclu Do n M N Y | in 2 years before sterred in the ordered in the ordered in the ordered include gifts and offices. Fill in the determinant with the determinant with the ordered included in the ordered in th | e you filed dinary cou iransfers and transfers ails. Transfer State | for bankrup rse of your t d transfers m that you hav | pusiness of financial affairs? nade as security (such as the granting already listed on this statement. Description and value of property | ng of a security interest or mo | ortgage on your prop | erty). Date transfer |
| Inclu Do n M N Y | in 2 years before sterred in the ordered in the ordered in the ordered include gifts are to i | e you filed dinary cou iransfers and transfers ails. Transfer State | for bankrup rse of your t d transfers m that you hav | pusiness of financial affairs? nade as security (such as the granting already listed on this statement. Description and value of property | ng of a security interest or mo | ortgage on your prop | erty). Date transfer |

Entered 07/16/18 15:47:27 Case 18-19848 Doc 1 Filed 07/16/18 Document Page 49 of 54 Doris Debtor 1 Coburn Case number (if known)_ 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Z No Yes. Fill in the details. Description and value of the property transferred Date transfer was made Name of trust Part 83 List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. M No Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved. closing or transfer or transferred Name of Financial Institution XXXX-___ Checking Number Street Savings Money market ☐ Brokerage City ZIP Code State Other ☐ Checking XXXX-Name of Financial Institution ☐ Savings Number Street Money market ☐ Brokerage Other_ City State ZIP Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Mo No Q Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? D No Name of Financial Institution Q Yes Name Number Street Number Street City State ZIP Code City State

Case 18-19848 Doc 1 Filed 07/16/18 Entered 07/16/18 15:47:27 Document Page 50 of 54 Doris Debtor 1 Coburn Case number (if known) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? Q No Name of Storage Facility Name ☐ Yes Number Street Number Street City State ZIP Code ZIP Code identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. M No Yes. Fill in the details. Where is the property? Describe the property Value Owner's Name Street Number Street City ZIP Code Cltv ZIP Code Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ZÍ No Q Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street State ZIP Code

City

State

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| Debtor 1 | Doris First Name | Y. Middle Name Las | Coburn | Case number (if known) | |
|----------------|--|---|---|---|---|
| | | | | | |
| 25. Hav | e you notified any | governmental unit o | of any release of hazardous mater | rial? | |
| Ø | | | | | |
| | Yes. Fill in the det | ails. | | | |
| | | | Governmental unit | Environmental law, if you know it | Date of notice |
| | | | | | |
| | Name of site | | Governmental unit | - | 142-144 A. S. |
| | Number Street | | Number Street | | |
| | | | | | |
| | | | City State ZIP Code | - | |
| | City | State ZIP Code | | | |
| 26. Have | e you been a party | in any judicial or ad | ministrative proceeding under an | y environmental law? Include settlements ar | . al |
| Ø | No | ,, | providenting and or an | y on monnerical law r iniciade settlements ar | a oraers. |
| O, | Yes. Fill in the deta | iils. | | | |
| | | | Court or agency | Nature of the case | Status of the |
| (| Case title | | | | case |
| | | | Court Name | | Pending |
| - | | | , | - | On appeal |
| | | | Number Street | | ☐ Concluded |
| ä | Case number | | City State ZIP Coo | je | |
| | | | | | |
| Part 1 | 200000000 | | iness or Connections to Any | | |
| 27. With | in 4 years before y | ou filed for bankrup | tcy, did you own a business or ha n a trade, profession, or other ac | ave any of the following connections to any b | xusiness? |
| Ç | A member of a l | imited liability comp | any (LLC) or limited liability partr | tivity, either full-time or part-time nership (LLP) | |
| Ļ | A partner in a | artnership | | , | |
| | | | ecutive of a corporation | | |
| | | | g or equity securities of a corpora | ation | |
| Mada N □n ∨ | lo. None of the abo | ove applies. Go to Pa | irt 12. | | |
| 1 | es. Oneck an triat | apply above and fill (| in the details below for each busi Describe the nature of the business | | |
| | Business Name | | | Employer Identification numb Do not include Social Securit | |
| | | | | | |
| | Number Street | TATAL | | E(N: | - |
| | | | Name of accountant or bookkeeper | Dates business existed | |
| | | | | From To | |
| ; | City | State ZIP Code | | | |
| , | | | Describe the nature of the business | | |
| İ | Business Name | | | Do not include Social Security | / number or ITIN. |
| į | Number Street | | | EIN: | |
| | | | Name of accountant or bookkeeper | Dates business existed | |
| • | | | | _ | |
| č | City | State ZIP Code | | From To | |

Entered 07/16/18 15:47:27 Desc Main Case 18-19848 Doc 1 Filed 07/16/18 Page 52 of 54 Document Doris Coburn Case number (if known)_ Employer Identification number Describe the nature of the business Do not include Social Security number or ITIN. **Business Name** Number Street Name of accountant or bookkeeper Dates business existed From _____ To ____ City State ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. M No Q Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number Street ZIP Code

Part 12:

Debtor 1

Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| × D | * |
|---|--|
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date 7-16-18 | Date |
| Did you attach additional pages to Your Sta | atement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| √ No | |
| Yes | |
| Did you pay or agree to pay someone who i | is not an attorney to help you fill out bankruptcy forms? |
| Yes. Name of person Tania Stoxstell | Attach the Bankruptcy Petition Preparer's Notic Declaration, and Signature (Official Form 119). |

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| Fill in this in | formation to id | entify your case: | | |
|---------------------------------|---------------------|---------------------------------|---------------------|--|
| Debtor 1 | Doris First Name | Y. Middle Name | Coburn Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court f | for the: Northern District of I | | |
| Case number (if known) | | | | |
| | | | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Pare List Your Creditors Who Have Secured Claims

| For any creditors that you listed in Part 1 of Schedule D: C information below. | Creditors Who Have Claims Secured by Property (Offici | al Form 106D), fill in the |
|---|--|---|
| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
| Creditor's name: American Credit Acceptance | ☐ Surrender the property. | □ No |
| · | Retain the property and redeem it. | ☑ Yes |
| Description of 2016 Chrysler 200 S property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |
| Creditor's | D Currendantia | |
| name: | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| Description of property securing debt: | Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| · | Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | ☐ Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | ed res |
| | Retain the property and [explain]; | |
| Creditor's | | |
| name: | ☐ Surrender the property. | ☐ No |
| Description of | Retain the property and redeem it. | ☐ Yes |
| property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |
| | | |

12/15

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|---|
| known) |
| Unexpired Leases (Official Form 196G) |
| I in effect; the lease period has not yet 1 U.S.C. § 365(p)(2). |
| Will the lease be assumed? |
| ☑ No ☑ Yes |
| □ No □ Yes |
| ☐ No ☐ Yes |
| □ No □ Yes |
| ☐ No ☐ Yes |
| □ No |
| ☐ Yes |
| □ No □ Yes |
| |

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

| * D | * |
|-----------------------|-----------------------|
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date 0 116 2018 | Date |